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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

			Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
, Planned Parenthood V	otes		1
ADDRESS (number and street)	123 William St, 10th Floor		
▼ Oharde 'frail'ffanail	1		
Check if different than previously reported. (ACC)	New York		NY 10038
2. FEC IDENTIFICATION NU	JMBER ▼ CIT	YA	STATE ▲ ZIP CODE ▲
C C00489799		S THIS NEW EPORT (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Feb	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:	Mar	20 (M3) Jun 20 (M6	(Non-Election Year Only)
April 15 Quarterly Report (Q		20 (M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q	(C) 12-Day	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (Q	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (Y		n on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	Electio	n on	in the State of
5. Covering Period 09	01 2016	through 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined thi	is Report and to the best of	my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasurer	Gustafson, Liz, , , r		·
Signature of Treasurer	ufson, Liz, , ,	[Electronically Filed]	Date 12 23 / 2016
NOTE: Submission of false, errone	eous, or incomplete information	n may subject the person signing	this Report to the penalties of 52 U.S.C. § 30109
Office Use			FEC FORM 3X Rev. 05/2016

FEC Form 3X (Rev. 05/2016)	SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS	Page 2
Write or Type Committee Name		. 430 =
Planned Parenthood Votes		
Report Covering the Period: From:	09 / 01 / 2016	To: 09 / 30 / 2016
	COLUMN A This Period	COLUMN B Calendar Year-to-Date
. (a) Cash on Hand January 1, 2016		1143446.70
(b) Cash on Hand at Beginning of Reporting Period	2481238.20	
(c) Total Receipts (from Line 19)	5085000.00	15667604.54
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7566238.20	16811051.24
. Total Disbursements (from Line 31)	3831612.34	13076425.38
Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3734625.86	3734625.86
Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
O. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	289147.96	
This committee has qualified as a multi	icandidate committee. (see FEC FORM 1M)	
	For further information contact:	
	Federal Election Commission 999 E Street, NW Washington, DC 20463	

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Write or Type Committee Name

Ρ	lanned	Parer	nthood	Votes
	ıaı II ICU	ı arcı	111111111111111111111111111111111111111	V (),(5:3)

01 09 2016 09 30 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 4584750.00 15154319.54 (i) Itemized (use Schedule A)..... 250.00 10785.00 (ii) Unitemized (iii) TOTAL (add 15165104.54 4585000.00 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 500000.00 502500.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 15667604.54 5085000.00 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 5085000.00 15667604.54 20. Total Federal Receipts 5085000.00 15667604.54 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursemer	nts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
 Operating Expenditures: (a) Allocated Federal/Non-F 	 Federal	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Carolina. I out to puto		
Activity (from Schedule	H4)	0.00	0.00		
(i) Federal Share		0.00	0.00		
(ii) Non-Federal Share		0.00	0.00		
(b) Other Federal Operating Expenditures	-	-639826.66	1616647.00		
(c) Total Operating Expend	litures	200000000	4040047.00		
(add 21(a)(i), (a)(ii), and		-639826.66	1616647.00		
Transfers to Affiliated/Other Committees	•	0.00	0.00		
 Contributions to Federal Candidates/Committee and Other Political Committee 	tees ees	946666.66	1359701.03		
Independent Expenditures (use Schedule E)	F	2874542.10	7693455.03		
Coordinated Party Expenditude (52 U.S.C. § 30116(d))	ures	4 4	7 093433.03		
(use Schedule F)		0.00	0.00		
6. Loan Repayments Made		0.00	0.00		
7. Loans Made 8. Refunds of Contributions To		0.00	0.00		
(a) Individuals/Persons Oth Than Political Committee		0.00	1000000.00		
(b) Political Party Committee	ees	0.00	0.00		
(c) Other Political Committee (such as PACs)		0.00	0.00		
(d) Total Contribution Refu		0.00	45		
(add Lines 28(a), (b), a		0.00	1000000.00		
9. Other Disbursements (Include	ding				
Non-Federal Donations)		650230.24	1406622.32		
D. Federal Election Activity (52	U.S.C. § 30101(20))				
(a) Allocated Federal Elect					
(from Schedule H6)	_				
(i) Federal Share		0.00	0.00		
(ii) "Levin" Share		0.00	0.00		
(b) Federal Election Activity Entirely With Federal F		0.00	0.00		
(c) Total Federal Election A	Activity (add	0.00	0.00		
Lines 30(a)(i), 30(a)(ii)	and 30(b))	0.00	0.00		
. Total Disbursements (add Li					
23, 24, 25, 26, 27, 28(d), 29	9 and 30(c))	3831612.34	13076425.38		
. Total Federal Disbursements					
(subtract Line 21(a)(ii) and I from Line 31)		3831612.34	40070 107 00		
		3031012.34	13076425.38		

DETAILED SUMMARY PAGE

of Disbursements

III Not Contributional	COLUMNIA	COLUMNI D			
III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date			
33. Total Contributions (other than loans) (from Line 11(d), page 3)	5085000.00	15667604.54			
34. Total Contribution Refunds (from Line 28(d))	0.00	1000000.00			
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5085000.00	14667604.54			
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-639826.66	1616647.00			
77. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00			
88. Net Operating Expenditures (subtract Line 37 from Line 36)	-639826.66	1616647.00			

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF Hz G7 < 98 I @ 'CF' + H9 A = N5 H+CB

Form/Schedule: F3XA

Transaction ID:

After a voluntary review of our records, we are submitting this amendment to a) reclassify two receipts based upon the proper legal status of the contributing organizations and b)reflect the proper application of disbursements and debts owed by the committee.

Form/Schedule: Transaction ID:

TOTAL This Period (last page this line number only).....

Use separate schedule(s)

l	FOR LINE NUMBER:						PAGE		7	OF	•	120
I	(check only one)											
I		X	11a		11b		11c		12	2		
l			13		14		15		16	6		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Barnes, Patricia, , , Date of Receipt Mailing Address 712 Arrowhead Street 14 2016 City Zip Code State Transaction ID: A2016-1995372 MN Aurora 55705 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Biddle, Geoffrey, , , Date of Receipt Mailing Address 2839 1/2 Prince Street 09 2016 City State Zip Code Transaction ID: A2016-1995373 CA Berkeley 94705-2614 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD Photographer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Bloomberg, Michael, , Mr., Date of Receipt Mailing Address 17 E 79 St 2016 City Zip Code State Transaction ID: A2016-1995374 NY New York 10075-0101 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) **BLOOMBERG LP** Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) 1005500.00 SUBTOTAL of Receipts This Page (optional).....

7

: 97 A = G7 9 @ G5 B9 CI G'H9 LHF9 @ 5 H98 'HC '5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: SA11AI

Transaction ID:

Please note that our committee follows all federal regulations, including those found at 11 CFR 104.7(a) governing the solicitation of contributors. This committee specifically requests all pertinent information from contributors, including employer and occupation; informs contributors that the committee is required by law to report the same; and, makes a follow-up request for omitted information when necessary. The committee thus complies with the best efforts rules.

Form/Schedule: Transaction ID:

TOTAL This Period (last page this line number only).....

Use separate schedule(s)

FOR LINE NUMBER:					:	PAGE		9	OF	120
(check only one)										
	X	11a		11b		11c		12		
		13		14		15		16		17

for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Burnett, Nancy, P, Mrs, Date of Receipt Mailing Address 17 Meadow Place 20 2016 City Zip Code State Transaction ID: A2016-1995375 CA Carmel Valley 93924 Amount of Each Receipt this Period FEC ID number of contributing C 100000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired None Receipt For: Aggregate Year-to-Date ▼ Primary General 100000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Chesler, Ellen, C, Dr., Date of Receipt Mailing Address 1 W 72nd Street 09 2016 City State Zip Code Transaction ID: A2016-1995376 NY New York 10023 Amount of Each Receipt this Period FEC ID number of contributing 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Roosevelt Institute Fellow Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 25000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Chigier, Shelly, D., Date of Receipt Mailing Address 237 Summer Street 30 2016 City State Zip Code Transaction ID: A2016-1995377 MA Manchester 01944-1540 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General 30000.00 Other (specify) 150000.00 SUBTOTAL of Receipts This Page (optional).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Drexler, Peggy, , , Date of Receipt Mailing Address 640 Park Avenue 2016 City Zip Code State Transaction ID: A2016-1995378 NY New York 10065 Amount of Each Receipt this Period FEC ID number of contributing C 35000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED **Psychologist** Receipt For: Aggregate Year-to-Date ▼ Primary General 35000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Feit, James, H, Mr., Date of Receipt Mailing Address 779 Shasta Fir Drive 09 2016 City State Zip Code Transaction ID: A2016-1995379 CA Sunnyvale 94086 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None Retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Gleberman, Carson, , , Date of Receipt Mailing Address 133 West 69th St #1 28 2016 City Zip Code State Transaction ID: A2016-1995380 NY New York 10023-5278 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) 45500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Goldman Fowler, Amy, P, Dr., Date of Receipt Mailing Address 164 Mountain View Road 20 2016 City Zip Code State Transaction ID: A2016-1995381 NY Rhinebeck 12572-2820 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED Writer Receipt For: Aggregate Year-to-Date ▼ Primary General 2000000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gottesman, Jane, L,, Date of Receipt Mailing Address 2839 1/2 Prince Street 09 2016 City State Zip Code Transaction ID: A2016-1995382 CA Berkeley 94705-2614 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYÉD Writer Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Greenley, Mary, D., Date of Receipt Mailing Address 2689 Maple Drive 12 2016 City Zip Code State Transaction ID: A2016-1995383 WI McFarland 53558-9279 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Lawyer Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1005500.00 SUBTOTAL of Receipts This Page (optional).....

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FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Guveyian, Kenneth, H,, Date of Receipt Mailing Address 40 Fairview Road 2016 City Zip Code State Transaction ID: A2016-1995384 PA Broomall 19008 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Hedberg, Charles, R, , Date of Receipt Mailing Address 24 Bishop Avenue 09 15 2016 City State Zip Code Transaction ID: A2016-1995385 NY Westhampton 11977 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Hellebrand-Blood, Nancy, , , Date of Receipt Mailing Address 708 S American Street 2016 City State Zip Code Transaction ID: A2016-1995386 PΑ Philadelphia 19147-3301 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) 11500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Henry, John, B,, Date of Receipt Mailing Address 54 Riverside Drive #16-B 16 2016 City Zip Code State Transaction ID: A2016-1995387 NY New York 10024-6552 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED Writer Receipt For: Aggregate Year-to-Date ▼ Primary General 30000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Jensen, Kathleen, R,, Date of Receipt Mailing Address 1212 SW Hessler Drive 2016 City State Zip Code Transaction ID: A2016-1995388 Portland OR 97239-2807 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None Retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Kraus, Lisa, V., Date of Receipt Mailing Address 4906 Shadywood Lane 30 2016 City State Zip Code Transaction ID: A2016-1995389 TX Dallas 75209-2024 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Lawyer Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 16000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the Detailed Summary Page

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ı	FOF	R LINE	NUMBER	:	PAGE	1	I4 OF		120	
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Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Lafer, Jill, , , Date of Receipt Mailing Address 1060 Fifth Avenue 2016 City State Zip Code Transaction ID: A2016-1995390 NY New York 10128-0104 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Hoffman-Lafer Associates Consultant Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lee, Barbara, F,, Date of Receipt Mailing Address 1111 Race Street #14A 09 2016 City State Zip Code Transaction ID: A2016-1995391 CO 80206-2834 Denver Amount of Each Receipt this Period FEC ID number of contributing 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None **RETIRED** Receipt For: Aggregate Year-to-Date ▼ Primary General 250000,00 Other (specify) C.

		4	
Full Name of Individual (Last, First, Middle In Lieberman, Unice, B, , Mailing Address 3937 Garrison St NW	itial) or Full Orga	anization Name	Date of Receipt 09 22 2016
City Washington	State DC	Zip Code 20016-4219	09 22 2016 Transaction ID : A2016-1995392 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer (for Individual) SELF-EMPLOYED		ation (for Individual) JLTANT	Memo Item
Receipt For: Primary General Other (specify)	Aggregate Ye	ar-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			55250.00

TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Liebman, Rebecca, J,, Date of Receipt Mailing Address 2064 E Bay Drive NE 2016 City Zip Code State Transaction ID: A2016-1995393 WA Olympia 98506-3220 Amount of Each Receipt this Period FEC ID number of contributing C 2000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) None Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Loeb, Margaret, , Ms., Date of Receipt Mailing Address 15 Central Park West PH 39 09 2016 City State Zip Code Transaction ID: A2016-1995394 NY New York 10023-7719 Amount of Each Receipt this Period FEC ID number of contributing 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. McKellar, Marie, T, Dr., Date of Receipt Mailing Address PO Box 149 09 2016 City Zip Code State Transaction ID: A2016-1995395 NY Dobbs Ferry 10522-0149 Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 100000.00 Other (specify) 102000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FEC ID number of contributing

federal political committee.

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Milliken, Margaret, , Ms., Date of Receipt Mailing Address 157 Pine St 2016 City Zip Code State Transaction ID: A2016-1995396 ME Portland 04102-3529 Amount of Each Receipt this Period FEC ID number of contributing C 250000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Unemployed None Receipt For: Aggregate Year-to-Date ▼ Primary General 250000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Pigott, Gaye, T,, Date of Receipt Mailing Address 1405 42nd Avenue E 09 2016 City State Zip Code Transaction ID: A2016-1995397 WA Seattle 98112-3807 Amount of Each Receipt this Period FEC ID number of contributing 100000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) None Homemaker Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 600000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Pritzker, Jay Robert, , , Date of Receipt Mailing Address 111 S Wacker Drive #4000 20 2016 City Zip Code State Transaction ID : A2016-1995398 IL Chicago 60606 Amount of Each Receipt this Period

Name of Employer (for Individual) Pritzker Group	Occupation (for In	Occupation (for Individual) Manager Manager							
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date	gate Year-to-Date ▼ 1000000.00							
SUBTOTAL of Receipts This Page (optional)		>		. ,		850000.00			
TOTAL This Period (last page this line number	only)								

500000.00

Other (specify)

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

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ITEMIZED RECEIPTS for each category of the Detailed Summary Page Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Richardson, Albert, S, Mr., Jr. Date of Receipt Mailing Address 27 Niagara Pier 2016 City Zip Code State Transaction ID: A2016-1995399 PA Erie 16507-2310 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired None Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Satterfield, Lise, K, , M.D. Date of Receipt Mailing Address 1905 Corbridge Lane 09 2016 City State Zip Code Transaction ID: A2016-1995400 MD Monkton 21111 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Clinical Associates Doctor Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 500.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Sher, Abby, S,, Date of Receipt Mailing Address 3200 Airport Avenue #27 23 2016 City State Zip Code Transaction ID: A2016-1995401 CA Santa Monica 90405-6116 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired None Receipt For: Aggregate Year-to-Date ▼ Primary General

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for e Deta Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Planned Parenthood Votes Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Silberstein, Stephen, M,, Date of Receipt Mailing Address 29 Eucalyptus Road 15 2016 City Zip Code State Transaction ID: A2016-1995402 CA Belvedere Tiburon 94920-2435 Amount of Each Receipt this Period FEC ID number of contributing C 100000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired None Receipt For: Aggregate Year-to-Date ▼ Primary General 100000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Smith, Tamyka, M, , Date of Receipt Mailing Address 20 Desbrosses Street #4 09 2016 City State Zip Code Transaction ID: A2016-1995403 NY New York 10013-1704 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Information Requested Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 2000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Soros Colombel, Andrea, Ms., Date of Receipt Mailing Address 5 Sherbrooke Rd 15 2016 City Zip Code State Transaction ID: A2016-1995404 NY Scarsdale 10583-4431 Amount of Each Receipt this Period FEC ID number of contributing C 1000000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) SELF-EMPLOYED Information Requested Receipt For: Aggregate Year-to-Date ▼ Primary General 1000000.00 Other (specify) 1102000.00 SUBTOTAL of Receipts This Page (optional).....

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	City Washington	State DC	Zip Code 20005	Transaction ID : A2016-15173 Amount of Each Receipt this Period
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	Mailing Address 601 13th Street NW Suite 610N			09 14 2016								
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	Washington	DC	20005	Amount of Each Receipt this Period								
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Mailing Address 3605 Wilshire Ave						09		07			2016	
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San Francisco	CA	94108				-		Janon	110		-	
Purpose of Disbursement software licensing			00	11		Transaction ID : B632943						
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Full Name (Last, First, Middle Initial) C. Stott Development Solutions Grou	ıp, Inc				D	ate of	f Disk	ourser	ment			
Mailing Address 3605 Wilshire Ave					 [09	/	28			2016	Y
C:4.	Ctoto	Zin Codo										
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NAME OF COMMITTEE (In Full)	•								
Planned Parenthood Votes									
Full Name (Last, First, Middle Initial) 4. Project New America			Date of Disbursement						
Mailing Address 450 E. 17th Ave. Suite 310			09 22 2016						
,	State Zip Code CO 80203		FEC Identification Number						
Denver Purpose of Disbursement	80203		C						
Research Services		001	Transaction ID : B632944						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
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Full Name (Last, First, Middle Initial)									
3. Catalist LLC			Date of Disbursement						
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maining / dolooo Tugu vermont Ave./Sie. 300			07 2010						
City Washington	State Zip Code DC 20006		FEC Identification Number						
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Database Services		001	Transaction ID : B632933						
Candidate Name		Category/ Type	Amount of Each Disbursement this Period						
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Senate President	Primary General								
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C. Catalist LLC			Date of Disbursement						
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City	State Zip Code		FEC Identification Number						
Washington	DC 20006								
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Candidate Name		Category/	Transaction ID: B632934 Amount of Each Disbursement this Period						
Office Sought: House Disburse	ment For: 2016	Туре	187.50						
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Full Name (Last, First, Middle Initial) Analyst Institute LLC			Date of Disbursement						
Mailing Address 815 16th Street, NW			09 13 2016						
,	State Zip Code 20006		FEC Identification Number						
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Washington	State Zip Code DC 20006		FEC Identification Number						
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Full Name (Last, First, Middle Initial) Catalist LLC			Date of Disbursement						
Mailing Address 1090 Vermont Ave./Ste. 300			09 22 2016						
,	State Zip Code DC 20006	001	FEC Identification Number						
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	Mailing Address 2000 Daniel Island Drive					09		14		L	2016			
	,	State SC	Zip Code 29492			FEC Id	lentifica	ation	Num	ıber				
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A. Bank of America				Date of Disbursement							
Mailing Address P.O. Box 27025				09							
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B. Precision Strategies				Date of	Disbursem	_					
Mailing Address 1121 14th Street NW, Suite 700				09	23	2016					
Maining Address 1121 14th Street NW, Suite 700				00	20	2010					
City	State	Zip Code		FFC Ide	entification I	Number					
Washington	DC	20005			Trainocation 1	Tallibor					
Purpose of Disbursement Communications Consulting			001	C							
Candidate Name						: B632945					
			Category/ Type	Amount	of Each Di	isbursement this Period					
Office Sought: House Disburser	ment For:	2016	71	11		750.00					
Senate	Primary	General			,	, , , , , , , , , , , , , , , , , , , ,					
	Other (spec		_	Mei	no Item						
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Full Name (Last, First, Middle Initial) C. Planned Parenthood Votes Colora	do			Date of	Disbursem	ent					
Flamed Farenthood votes Colora	uo			M = M	/ D D	/ Y Y Y Y					
Mailing Address 7155 E. 38th Avenue				09	12	2016					
		T									
City Denver	State CO	Zip Code 80207		FEC Ide	entification I	Number					
Purpose of Disbursement		80207		C							
reimbursement for travel expenses			012		neaction IF	D : B633046					
Candidate Name			Category/			isbursement this Period					
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	ment For: 2				-	1765.00					
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SCHEDULE B (FEC Form 3X)				F	PAGE	28 O	F 120					
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or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
Planned Parenthood Votes												
Full Name (Last, First, Middle Initial)						_						
A. Planned Parenthood Advocates of Ohio						Date of	f Disb	D II I	D /		Y Y	Y
Mailing Address 206 E State St.	I					09		07			2016	
City Columbus	State OH	Zip Code 43215				FEC Id	entific	ation	Numb	oer		
Purpose of Disbursement	0	40210			\exists	С	-		-		-	
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Candidate Name			Cate	gory/							o nt this P	eriod
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President	<i>.</i> .					Mo	emo It	om				
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Full Name (Last, First, Middle Initial)												
B. American Teleconferencing Services, Ltd						Date of	f Disb	urser	nent			
Mailing Address 3280 Peachtree Rd., NW/Suite 1000					_	М = М	′	20			2016	Y
S200 Feachtree Rd., NW/Suite I	000					03	-	20			2010	_
City	State	Zip Code				FEC Id	entific	ation	Numb	oer		
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Full Name (Last, First, Middle Initial)												
C. Blueprint Interactive						Date of	f Disb	urser	nent			
Mailing Address 2229 North Pollard St						09	/	08			2016	
City	State	Zip Code				FEC Id	ontific	otion	Numb	or		
Arlington	VA	22207					enunc	allon	Nullik	Jei	-	
Purpose of Disbursement Prepayment for digital ad buy and commission			00)3	1	C	ansac	tion I	ID : B6	33517	6	
Candidate Name			Cate			Amoun	t of E	ach [Disburs	seme	nt this P	eriod
Office Sought: House Disburs	ement For:	2016	Ту	he	\dashv					1	16950.00)
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President x	Other (sp	ecify) 🔻				Me	emo It	em				
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Any information copied from such Reports and Statem	lents may not be so	old or used	by any perso	n for the pur	pose of solici	tina contribution	ns
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
Planned Parenthood Votes							
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Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund I	nc			Date of Di	sbursement		
Trainied Farentilood Action Fund in	110.			M M /	D D /	YYYY	1
Mailing Address 123 William St, 10th Floor				09	09	2016	
Otto	7:- 0-	-1-					
	State Zip Coo NY 10038			FEC Identi	fication Numb	er	
Purpose of Disbursement	1999			C			
Reimbursement for Program Staff time			001		action ID : B6	35164	
Candidate Name			Category/			sement this Per	riod
Office Sought: House Disbursen	nent For: 2016		Туре			6753.50	
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	Other (specify) ▼			Memo	Itom		
State: District:	Not A	pplicable		Ivienio	item		
Full Name (Last, First, Middle Initial)							
3. Planned Parenthood Advocates of Mar Monte					sbursement		
Mailing Address 1605 The Alameda					14	2016	
Toda The Alameda				09			
,	State Zip Co			FEC Identi	fication Numb	er	
San Jose Purpose of Disbursement	CA 95126	5					
Prepayment			001	C			
Candidate Name			Category/		action ID : B6 Each Disburs	35177 sement this Pei	riod
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	nent For: 2016					11972.44	_
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Full Name (Last, First, Middle Initial)							
SKDKnickerbocker				Date of Di	sbursement		
				M = M /	D D /	Y	1
Mailing Address 1150 18th St., NW #800				09	20	2016	
City	State Zip Co	de		FEC Identi	fication Numb	ner	
Washington	DC 20036	5			ilication indinic		
Purpose of Disbursement Pre-Payment for future IEs		lг	001	C			
Candidate Name					action ID : B6	33288 sement this Per	riad
		'	Category/ Type	Amount of	Each Disbuis	sement this rei	ilou
Office Sought: House Disbursen	nent For: 2016					3984.00	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only		PAGE 30 OF 120
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 28a	22 23 23 28c 28c	26 27 29 30b
Any information copied from such Reports and Stater or for commercial purposes, other than using the nan				
NAME OF COMMITTEE (In Full) Planned Parenthood Votes	io and address of any pointed			On Cook Committee
Full Name (Last, First, Middle Initial) A. Community Outreach Group LLC			Date of Disbursen	_
Mailing Address 1110 Vermont Ave N.W. #300			08 31	2016
Washington	State Zip Code 20005		FEC Identification	Number
Purpose of Disbursement Drawdown against 8/31/16 prepayment for IEs (see Candidate Name	e schedule E)	001	Transaction II	
Office Sought: House Disburser	ment For: 2016	Category/ Type	Amount of Each L	isbursement this Period
Senate President State	Primary General Other (specify) ▼		Memo Item	7 1 1 7 1 1
State: District: Full Name (Last, First, Middle Initial)	Not Applicable			
3- Planned Parenthood Action Fund I	nc.		Date of Disbursen	
Mailing Address 123 William St, 10th Floor			09 14	2016
City New York	State Zip Code NY 10038		FEC Identification	Number
Purpose of Disbursement Reimbursement for staff time		001	С	
Candidate Name		Category/ Type	Transaction II Amount of Each D	D: B636687 Disbursement this Period
Senate	ment For: 2016 Primary General		4	4813.31
State: President X	Other (specify) Not Applicable		Memo Item	
Full Name (Last, First, Middle Initial) - Planned Parenthood Action Fund I	nc.		Date of Disbursen	_
Mailing Address 123 William St., 10th Floor			09 13	2016
City New York Purpose of Disbursement	State Zip Code NY 10038		FEC Identification	Number
IEs for various candidates in Sept; see Schedule E Candidate Name		001 Category/	Transaction I	D : B636159 Disbursement this Period
Office Sought: House Disburser	ment For: 2016	Type		-1085.70
Senate President State: District:	Primary General Other (specify) ▼ Not Applicable			rawdown on advance to Actic und reported on 2016 M5 rep
SUBTOTAL of Disbursements This Page (optional)	•	>		-1015630.22
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SCHEDULE B (FEC Form 3X)	lles com	roto ogle = did = /=\	FOR LINE			PAGE 31 OF 120
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		Summary Page	21b 28a	22 28b	x 23 28c	26 27 29 30b
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NAME OF COMMITTEE (In Full)						
Planned Parenthood Votes						
Full Name (Last, First, Middle Initial)				5	D	
A. United We Can				Date of	Disburseme	nt
Mailing Address 1800 Massachusetts Ave, NW				09	30	2016
City Washington	State DC	Zip Code 20036		FEC Ide	ntification N	umber
Purpose of Disbursement		20030		С	C00523621	
Contribution			011		saction ID	- B622156
Candidate Name			Category/			bursement this Period
Office Sought: House Disbursen	nent For: 2	016	Туре	T		666666.66
	Primary	General			Con	tribution
	Other (spec			Men	no Item	itribution
State: District:		Not Applicable				
Full Name (Last, First, Middle Initial) B. Michigan Planned Parenthood Vote				Date of	Disburseme	nt
B. Michigan Planned Parenthood Votes				M M	/ D D	/
Mailing Address 115 W Allegan Ste. 500				09	14	2016
,	State	Zip Code		FEC Ide	ntification N	umber
Lansing Purpose of Disbursement	MI	48933		С	00568931	
Contribution to federal committee in MI 011					saction ID :	D622046
Candidate Name			Category/			bursement this Period
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	Primary	General			7	100000.00
President				Men	no Item	
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Full Name (Last, First, Middle Initial)	. A /:	. 5		Data of	Disburseme	nt.
C. Planned Parenthood Advocates of	vviscons	sin Political F	-una	M M	/ D D	/ Y Y Y Y
Mailing Address 111 King St.#23				09	21	2016
,	State	Zip Code		FEC Ide	ntification N	umber
Madison Purpose of Disbursement	WI	53701			C90008673	
Contribution to federal committee in WI					nsaction ID	· B632017
Candidate Name			Category/			bursement this Period
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Planned Parenthood Votes			
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" Foi. Citile. of Flatified Paterilliood	AUVOCATES OF AZ		M M / D D / Y Y Y
Mailing Address 4751 N. 15th Street			09 08 2016
City Phoenix	State Zip Code AZ 85014		FEC Identification Number
Purpose of Disbursement	AZ 03014		C
Contribution to non-federal state committee in AZ		011	
Candidate Name		Category/	Transaction ID : B632921 Amount of Each Disbursement this Period
		Type	
	ment For: 2016		100000.00
Duratida et	Primary General Other (specify) ▼		
State: President X	Not Applica	able	Memo Item
Full Name (Last, First, Middle Initial)			
3. Planned Parenthood Votes Colorado Indepe	endent Expenditure Co	ommittee	Date of Disbursement
	M M / D D / Y Y Y Y		
Mailing Address 7155 E 38th			09 21 2016
City	State Zip Code		
	CO 80207		FEC Identification Number
Purpose of Disbursement Contribution to non-federal state committee in CO	,		
Candidate Name		011	Transaction ID : B632927
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nent For: 2016	Туре	150000.00
	Primary General	1	4 4
President x	Other (specify)		Memo Item
State: District:	Not Applica	able	L meme nem
Full Name (Last, First, Middle Initial)		". DAG	Detect District out out
C. Planned Parenthood Votes New Mexico	independent Expend	diture PAC	Date of Disbursement
Mailing Address 7155 E 38th			09 30 2016
•	State Zip Code		FEC Identification Number
Denver Purpose of Disbursement	CO 80207		
Contribution to non-federal state committee in NM		011	C
Candidate Name		Category/	Transaction ID : B632928 Amount of Each Disbursement this Period
		Type	
	ment For: 2016		80000.00
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State: District:	Other (specify) ▼ Not Applica	able	Memo Item
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NAME OF COMMITTEE (In Full) Planned Parenthood Votes		, ,		
Full Name (Last, First, Middle Initial) Planned Parenthood Advocates of	MT PAC			Date of Disbursement
Mailing Address 2525 Fourth Avenue North Suite 2	01			09 14 2016
Billings	State Zip Co MT 59101			FEC Identification Number
Purpose of Disbursement Contribution for non-federal State Committee in MT Candidate Name	Г		011 Category/	Transaction ID : B632918 Amount of Each Disbursement this Period
Office Sought: House Disburse Senate President State: District:	Other (specify) ▼	eneral	Туре	200000.00 Memo Item
Full Name (Last, First, Middle Initial) FedEx Print Center Mailing Address 3 Colby Ct.	Not	рупсавіс		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Bedford Purpose of Disbursement Canvass Lit in support of Colin Van Ostern for Gov Candidate Name	State Zip Co. NH 03110 v. starting on 9/2/16		011 Category/	FEC Identification Number C Transaction ID: B627070 Amount of Each Disbursement this Period
Van Ostern, Colin, , , Office Sought: House Senate President State: NH District:	ment For: 2016 Primary Go	eneral	Type	MEMO Memo Item
Full Name (Last, First, Middle Initial) Community Outreach Group LLC				Date of Disbursement
Mailing Address 1110 Vermont Ave N.W. #300				09 02 2016
City Washington Purpose of Disbursement Canvassing for NH State office/candidates Candidate Name	State Zip Co DC 20005		011	FEC Identification Number C Transaction ID : B627075
	ment For: 2016		Category/ Type	Amount of Each Disbursement this Period 26723.24
omee dought. House Disburse		eneral		4 4

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 34 OF 120
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or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)			
Planned Parenthood Votes			
/			
Full Name (Last, First, Middle Initial) The Journeyman Press			Date of Disbursement
- The Journeyman Fless			M M / D D / Y Y Y Y
Mailing Address 11 Malcolm Hoyt Dr.			09 03 2016
,	State Zip Code MA 01950		FEC Identification Number
Purpose of Disbursement	01330		C
Canvass Lit in support of Colin Van Ostern for Gov.	starting on 9/3/16	011	Transaction ID : B627073
Candidate Name		Category/	Amount of Each Disbursement this Period
Van Ostern, Colin, , ,		Type	245.75
	ment For: 2016		315.75
	Primary General Other (specify) ▼		
State: NH District:	(Memo Item
Full Name (Last, First, Middle Initial)			
3. The Journeyman Press			Date of Disbursement
		M = M / D = D / Y = Y = Y	
Mailing Address 11 Malcolm Hoyt Dr.			09 12 2016
City	State Zip Code		FEC Identification Number
	MA 01950		
Purpose of Disbursement Canvass Lit in support of Colin Van Ostern for Gov.	starting on 9/12/16	011	C
Candidate Name			Transaction ID : B627076
Van Ostern, Colin, , ,		Category/ Type	Amount of Each Disbursement this Period
	nent For: 2016	21	947.25
	Primary General		7 7 7
	Other (specify)		X Memo Item
State: NH District:			
Full Name (Last, First, Middle Initial) Planned Parenthood Advocates of	W/L Inc		Date of Disbursement
Figure Farefulloud Advocates of	VVI, IIIC.		M M / D D / Y Y Y Y
Mailing Address 302 N Jackson St			09 21 2016
0.1	21-1-		
City Milwaukee	State Zip Code 53202		FEC Identification Number
Purpose of Disbursement	00202		C
Contribution to Non-federal State Committee in WI		011	Transaction ID : B632923
Candidate Name		Category/	Amount of Each Disbursement this Period
Office Sought: House Disbursen	nont For: 0040	Туре	80000.00
	ment For: 2016 Primary General		00000.00
	Other (specify)		Mama ham
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or for commercial purposes, other than using the nar	ments may not be sold or us		
NAME OF COMMITTEE (In Full) Planned Parenthood Votes			
Full Name (Last, First, Middle Initial) A. Planned Parenthood Action Fund I	Inc.		Date of Disbursement
Mailing Address 434 West 33rd Street			09 09 2016
New York	State Zip Code NY 10001		FEC Identification Number
Purpose of Disbursement Inkind staff support to The Political Cmte of PP Adv	vocates of AZ, a nonfed	001 Category/	Transaction ID : B635165 Amount of Each Disbursement this Period
Senate President 🗶	ment For: 2016 Primary General Other (specify)	Туре	6753.50 Memo Item
State: District: Full Name (Last, First, Middle Initial) Planned Parenthood Action Fund I	Not Applicabl	e	Date of Disbursement
Mailing Address 434 West 33rd Street			09 09 2016
New York Purpose of Disbursement	State Zip Code NY 10001		FEC Identification Number
Inkind staff support to PP Votes New Mexico IE PA Candidate Name	AC, a nonfed cmte	001 Category/ Type	Transaction ID: B635167 Amount of Each Disbursement this Period
Senate	ment For: 2016 Primary General Other (specify)		6753.50
State: District:	Not Applicab	le	Memo Item
Full Name (Last, First, Middle Initial)			Date of Disbursement
Mailing Address			
	State Zip Code		FEC Identification Number
Purpose of Disbursement Candidate Name	C		
		Category/ Type	Amount of Each Disbursement this Period
Office Sought: House Senate President State: Disburser	ment For: Primary General Other (specify) ▼		Memo Item
2.01.01.			
SUBTOTAL of Disbursements This Page (optional)			13507.00

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 36
FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Canvass literature MackCrounse Group Mailing Address 2001 N. Beauregard St. Ste 420 State Zip Code Alexandria VΑ 22311 Transaction ID: D439020 Outstanding Balance Beginning This Period 3950.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3950.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Production Fees: Television Advertisement SKDKnickerbocker LLC Mailing Address 1150 18th Street NW/Ste. 800 City State Zip Code Washington 20036 Outstanding Balance Beginning This Period Transaction ID: D439027 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 2736.00 0.00 7736.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Printing of IE mail piece and fundraising O'Brien Garrett (formerly known as OMP Inc.) mailer. See schedule E Mailing Address 1133 19th St. NW #300 City State Zip Code Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: D439029 23788.68 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 23788.68 0.00 35474.68 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

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X	10

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37 OF

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Translation services. See schedule E Itzamna Translations Company Mailing Address P.O. Box 1015 State Zip Code Glendale ΑZ 85311 Transaction ID: D439030 Outstanding Balance Beginning This Period 112.58 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 367.25 254.67 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Printing of postcards and posters See Alliance Marketing Distributor Inc. schedule E Mailing Address 133 Industrial Ave. City State Zip Code Hasbrouck Heights 07604 NJ Outstanding Balance Beginning This Period Transaction ID: D439032 884.58 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 884.58 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Purchase of domain name. See schedule E **Network Solutions** Mailing Address 13861 Sunrise Valley Dr. #300 City State Zip Code 20171 Herndon VA Outstanding Balance Beginning This Period Transaction ID: D439033 15.99 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 15.99 0.00 1267.82 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 38 OF 120 FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full) Planned Parenthood Votes					
A. Full Name (Last, First, Middle Initial) of Debtor Planned Parenthood Advocates	Nature of Debt (Purpose): Canvassing. See schedule E				
Mailing Address 206 E. State Street					
City Columbus					
Outstanding Balance Beginning This Period			Transaction ID: D439037		
78331.58					
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
0.00		78331.58	0.00		
B. Full Name (Last, First, Middle Initial) of Debtor Planned Parenthood Rocky Mou		ion Fund	Nature of Debt (Purpose): Events. See schedule E		
Mailing Address 7155 E. 38th Avenue					
City	State	Zip Code			
Denver	СО	80207			
Outstanding Balance Beginning This Period 12411.10			Transaction ID : D439038		
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
0.00					
C. Full Name (Last, First, Middle Initial) of Debtor Latino Decisions	r or Creditor		Nature of Debt (Purpose): Polling. See schedule E		
Mailing Address 15 South Grady Way, Suite 620					
City Seattle	State WA	Zip Code 98057			
Outstanding Balance Beginning This Period 55300.00			Transaction ID : D439039		
Amount Incurred This Period	Pay	ment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	55300.00		
1) SUBTOTALS This Period This Page (optional)		>	55300.00		
2) TOTALS This Period (last page this line number	only)	>	7 7		
3) TOTAL OUTSTANDING LOANS from Schedule (C (last page or	nly) ▶	7 7 7		
4) ADD 2) and 3) and carry forward to appropriate					

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9 **X** 10

PAGE 39 OF 120

	ME OF COMMITTEE (In Full) anned Parenthood Votes						
,	A. Full Name (Last, First, Middle Initial) of Debtor of Planned Parenthood Pennsylvan	ntes	Nature of Debt (Purpose): Phone calls, events, Consultant: strategy and messaging, canvassing. See schedule E				
Ī	Mailing Address 1514 North 2nd Street						
- 1	City Harrisburg	State PA	Zip Code 17102				
	Outstanding Balance Beginning This Period	I	-	Transaction ID : D439040			
	25000.00						
	Amount Incurred This Period 15730.00	Payn	nent This Period 40730.00	Outstanding Balance at Close of This Period 0.00			
Ļ	B. Full Name (Last, First, Middle Initial) of Debtor or	Craditor	7				
	Terris Barnes & Walters	Creditor		Nature of Debt (Purpose): Canvass Lit-Estimated costs. See Schedule E			
Ī	Mailing Address 400 Montgomery St # 700						
- 1	City San Francisco	State CA	Zip Code 94104				
Ī	Outstanding Balance Beginning This Period	I	1	Transaction ID : D439041			
	1732.67	_					
Amount Incurred This Period Payment This Period 16472.40 0.00			nent This Period	Outstanding Balance at Close of This Period 18205.07			
	C. Full Name (Last, First, Middle Initial) of Debtor of	or Craditor	7	Nature of Daht (Durages)			
	Community Outreach Group	or Greattor		Nature of Debt (Purpose): Canvassing. See Schedule E			
Ī	Mailing Address 1110 Vermont Ave N.W. #300						
- 1	City Washington	State DC	Zip Code 20050				
	Outstanding Balance Beginning This Period			Transaction ID : D439042			
	0.00 Amount Incurred This Period	Pavn	nent This Period	Outstanding Balance at Close of This Period			
	126708.02	1 dyn	0.00	126708.02			
		,	,				
1)	SUBTOTALS This Period This Page (optional)		>	144913.09			
2)	TOTALS This Period (last page this line number or	nly)	>				
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page onl	y) >				
4)	4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶						

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

9 **X** 10

120

40 OF

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Event tickets, staff time, video footage. See Planned Parenthood Action Fund Inc. schedule E Mailing Address 123 William St. 10th Flr City State Zip Code New York NY 10038 Transaction ID: D439035 Outstanding Balance Beginning This Period 5629.44 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5629.44 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Canvassing Lit. See Schedule E The Pivot Group Mailing Address 1720 I Street NW Suite 550 City State Zip Code Washington 20005 Outstanding Balance Beginning This Period Transaction ID: D439043 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 3540.00 0.00 3540.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Canvassing Lit. See Line 29 The Journeyman Press Mailing Address 11 Malcolm Hoyt Dr. City State Zip Code 01950 Newburyport MA Outstanding Balance Beginning This Period Transaction ID: D439044 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 1263.00 1263.00 10432.44 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 41 C

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X	10

120

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Canvassing Lit. See Line 29 FedEx Print Center Mailing Address 3 Colby Ct. State Zip Code **Bedford** NH 03110 Transaction ID: D439045 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1470.00 1470.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Small items & distribution. See Schedule E Drew & Rogers, Inc. Mailing Address 30 Plymouth Street City State Zip Code Fairfield 07004 NJ Outstanding Balance Beginning This Period Transaction ID: D439046 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 3612.93 3612.93 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Online Advertising. See Schedule E Blueprint Interactive Mailing Address 2229 North Pollard St City State Zip Code 22207 Arlington VA Outstanding Balance Beginning This Period Transaction ID: D439047 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 35250.00 35250.00 0.00 40332.93 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 42
FOR LINE NUMBER: (check only one)

	9
X	10

120

42 OF

NAME OF COMMITTEE (In Full) Planned Parenthood Votes A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Distribution Costs. See Schedule E **API Source** Mailing Address 2229 North Pollard St State Zip Code Lanham MD 20706 Transaction ID: D439048 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1427.00 1427.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Mailing Address City State Zip Code Outstanding Balance Beginning This Period Outstanding Balance at Close of This Period Payment This Period Amount Incurred This Period 1427.00 1) SUBTOTALS This Period This Page (optional)..... 289147.96 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 289147.96 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

TEMIZED INDEFENDENT EXPENDITORES	•		FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Catalist LLC			09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1090 Vermont Ave./Ste. 300			Amount
City	State	Zip Code	325.58
Washington	DC	20006	Transaction ID : B625145 Date of Disbursement or Obligation
Purpose of Expenditure Database Services		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Heck, Joseph, , ,		X Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 7	550037.95	Disbursement For: ☐ Primary 🗷 General 2016 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Catalist LLC			09
Mailing Address 1090 Vermont Ave./Ste. 300			Amount
City	State	Zip Code	325.58
Washington	DC	20006	Transaction ID : B625146 Date of Disbursement or Obligation
Purpose of Expenditure Database Services		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	550037.95	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	9S		651.16
(a) SUBTOTAL of Unitemized Independent Expendit	ures		
(a) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized	•	
Gustafson, Liz, , ,	[Electronically File	ed] Date	e 12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	لستنسا لسا لتنا

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 44 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Trainied Farenthood votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee Catalist LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1090 Vermont Ave./Ste. 300				09 06 2016
			Amo	ount
City	State	Zip Code		325.58
Washington	DC	20006		nsaction ID : B625148 e of Disbursement or Obligation
Purpose of Expenditure Database Services		Category/ Type 004		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District:
Clinton, Hillary, , ,		Oppose	res	
Calendar Year-To-Date Per Election for Office Sought	T T	2149965.77	Disbursement 2016	ent For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Catalist LLC				M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
Mailing Address 1090 Vermont Ave./Ste. 300			Amo	ount
City	State	Zip Code	-	325.59
Washington	DC	20006	Tra	Insaction ID : B625149 e of Disbursement or Obligation
Purpose of Expenditure Database Services		Category/ Type 004		09 06 2016
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Trump, Donald, , ,		✗ Oppose		ident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	2149965.77	Disbursement 2016	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			•	651.17
(a) SUBTOTAL of Unitemized Independent Expenditure	es		· [
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	[ed]	M M M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

PAGE 45 OF 120 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Community Outreach Group LLC 09 06 2016 Mailing Address 1110 Vermont Ave N.W. #300 Amount Zip Code 6418.07 City State DC 20005 Transaction ID: B625151 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Volunteer Recruitment. Pre-paid on M9 report. 004 08 2016 Type Name of Federal Candidate: Support Office Sought: House District: Heck, Joseph, , , NV Oppose President **x** Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 550037.95 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Community Outreach Group LLC 2016 06 09 Mailing Address 1110 Vermont Ave N.W. #300 Amount 6418.07 City State Zip Code Transaction ID: B625152 Washington DC 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ Volunteer Recruitment. Pre-paid on M9 report. 004 31 2016 08 Type Name of Federal Candidate: **x** Support Office Sought: House District: Cortez-Masto, Catherine, , , NV Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 550037.95 2016 Per Election for Office Sought Other (specify) ▶ 12836.14 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gustafson, Liz,,, [Electronically Filed] 23 2016 Date Signature

TEMIZED INDEPENDENT EXPENDITURES	İ			PAGE 46 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
				G 000403733
Check if 24-hour report 48-hour report	New repo	ort Amends repo		/ D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Community Outreach Group LLC				09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300			Amou	unt
City	State	Zip Code	-	5382.33
Washington	DC	20005		saction ID : B625153
Purpose of Expenditure Volunteer Recruitment. Pre-paid on M9 report.	_	Category/ 004		of Disbursement or Obligation M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
· ·		Type 004		00 31 2010
Name of Federal Candidate:		x Support	Office Soug	
Clinton, Hillary, , ,		Oppose	X Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2149965.77	Disburseme	nt For: Primary
Full Name of Payee		X Memo	Item Date	of Public Distribution/Dissemination
Community Outreach Group LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300				
			Amou	unt
City	State	Zip Code		1035.74
Washington	DC	20005		nsaction ID : B625172 of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment.		Category/ Type 004		M M 09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		Oppose	X Presid	dent Senate State: US
Calendar Year-To-Date		2149965.77	Disburseme	nt For: Primary 🗶 General
Per Election for Office Sought	7	2149903.77	2016	Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	3		. •	5382.33
(a) SUBTOTAL of Unitemized Independent Expenditu	ires			
(a) GOD TO TALE OF OTHER MEDICAL EXPONENTS	100			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		•
Gustafson, Liz, , ,	[Electronically Fil	led1 _	M = M /	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	[Electronically 1 to	Date	e 12	23 2016

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES					PAGE 47	OF 120
NAME OF COMMITTEE (In Full)					FOR LINE 24 (
Planned Parenthood Votes				FEC II	DENTIFICATION	NUMBER ▼
Trainica Farchinoda Voics				C	C00489799	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M /	D D / Y	YYYY
Full Name of Payee Community Outreach Group LLC		☐ Memo	_	M M	Distribution/Dis	Y
Mailing Address 1110 Vermont Ave N.W. #300			Amou	09 int	06	2016
		l =: 0 .				0440.07
City	State	Zip Code	سا_ ا		D 2005/55	6418.07
Washington	DC	20005			ID: B625155 irsement or Obli	gation
Purpose of Expenditure Volunteer Recruitment. Pre-paid on M9 report.		Category/ Type 004		08	31	2016
Name of Federal Candidate:		Support	Office Sough	ht·	House Dis	strict:
Trump, Donald, , ,		Coppose Suppose	resid			State: US
		* oppos				
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursemen 2016	nt For: Other (sp	Primary Decify) ▶	X General
Full Name of Payee Community Outreach Group LLC		Memo	_		c Distribution/Dis	
, , , , , , , , , , , , , , , , , , , ,				09	/ 06 /	2016
Mailing Address 1110 Vermont Ave N.W. #300			Amou	ınt		
City	State	Zip Code				38508.42
Washington	DC	20005	Tran		ID: B625156 irsement or Obli	gation
Purpose of Expenditure Phone Calls. Pre-paid on M9 report.		Category/ Type 004		08	31	2016
Name of Federal Candidate:		Support	Office Sough	ht:	House Dis	strict:
Trump, Donald, , ,		X Oppose	X Presid	_		State: US
Colondar Veer To Dete			Disburseme		Primary	✗ General
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	2016 —	Other (sp		- Ocheral
(a) SUBTOTAL of Itemized Independent Expenditures			.			14926.49
(a) SUBTOTAL of Unitemized Independent Expenditure	res		. =	-		
(-)				- 7		
(a) TOTAL Independent Expenditures			•	,		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
Gustafson, Liz, , ,	Electronically Fil	led] Date	e 12	23	2016	Y

PAGE 48 OF 120 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Community Outreach Group LLC 06 2016 Mailing Address 1110 Vermont Ave N.W. #300 Amount Zip Code 38508.42 City State DC 20005 Transaction ID: B625157 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone Calls. Pre-paid on M9 report. 004 08 2016 Type Name of Federal Candidate: **X** Support Office Sought: House District: Clinton, Hillary, , , US Oppose x President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 2149965.77 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Community Outreach Group LLC 2016 06 Mailing Address 1110 Vermont Ave N.W. #300 Amount 38508.42 City State Zip Code Washington Transaction ID: B625159 DC 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone Calls. Pre-paid on M9 report. 004 31 2016 08 Type Name of Federal Candidate: x Support Office Sought: House District: Cortez-Masto, Catherine, , , NV Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 550037.95 2016 Per Election for Office Sought Other (specify) ▶ 77016.84 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gustafson, Liz,,, [Electronically Filed] 23 2016 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 49 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes		C C00489799		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payee Community Outreach Group LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Community Cureach Group EEC				09 06 7 2016
Mailing Address 1110 Vermont Ave N.W. #300			Amou	int
City	State	Zip Code		85618.26
Washington	DC	20005		saction ID : B625103 of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004		08 / 31 / 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		x Oppose	x Presid	
Calendar Year-To-Date			Disburseme	nt For: Primary K General
Per Election for Office Sought	7 7	2149965.77	2016	Other (specify) ▶
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Community Outreach Group LLC			_ I	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300				
			Amou	ınt
City	State	Zip Code		85618.26
Washington	DC	20005	I	saction ID : B625105 of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004		08 / 31 / Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		Oppose	✗ Presid	
Calendar Year-To-Date		0440005 77	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7	2149965.77	2016	Other (specify) ▶
•				
(a) SUBTOTAL of Itemized Independent Expenditures	;		→	171236.52
(a) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(a) TOTAL Independent Expenditures				
(a) TOTAL independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led1	M = M /	
Signature	_г 2си отсину Г и	_ Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 50 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼		
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Community Outreach Group LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300				09 06 2016
1110 Veilliont Ave N.W. #300			An	mount
City	State	Zip Code		85618.26
Washington	DC	20005		ransaction ID : B625106 ate of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 00-	4	08 / 31 / 2016
Name of Federal Candidate:		X Support	Office Sc	ought: House District:
Strickland, Ted, , ,		Oppose		esident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		798633.79	Disburser	ment For: Primary X General
To a sisting the sistence of t	, ,			Other (specify) ►
Full Name of Payee Community Outreach Group LLC		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address				09 06 2016
Mailing Address 1110 Vermont Ave N.W. #300			An	mount
City	State	Zip Code		85618.25
Washington	DC	20005	-	ransaction ID: B625107 ate of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004	1	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sc	ought: House District:
Portman, Rob, , ,		x Oppose	Pre	esident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		798633.79	Disburser	ment For: Primary X General
	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				171236.51
			F	
(a) SUBTOTAL of Unitemized Independent Expenditur	es		. •	
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically File	ed]	M = M	23 2016
Signature		_ Dat	e 12	25 2010

TEMIZED INDEPENDENT EXPENDITURES			PAGE 51 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes	C C00489799		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 206 E State St.			09 06 2016 Amount
0.1	0	7: 0 1	2007.54
City Columbus	State OH	Zip Code 43215	3237.54 Transaction ID : B625109 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District:
Clinton, Hillary, , ,		Oppose	▼ President Senate State: US
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursement For: Primary General 2016
Fel Liection for Office Sought	7 7		Other (specify)
Full Name of Payee Planned Parenthood Advocates of Oh	nio	☐ Memo	Date of Public Distribution/Dissemination M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Mailing Address 206 E State St.			Amount
City	State	Zip Code	3237.53
Columbus	ОН	43215	Transaction ID : B625110 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Trump, Donald, , ,		x Oppose	▼ President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disbursement For: ☐ Primary X General 2016 ☐ Other (specify) ▶
•			
(a) SUBTOTAL of Itemized Independent Expenditures			▶ 6475.07
(a) SUBTOTAL of Unitemized Independent Expenditur	es		
(a) TOTAL Independent Expenditures			·
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized		
Gustafson, Liz, , ,	Electronically Fil	ed1	M = M / D D / Y = Y = Y
Signature	incany 1 ll	_ Date	e 12 23 2016

SCHEDULE E (FEC Form 3X)

SOMEDOLL L (1 LO 1 OM)				_			
TEMIZED INDEPENDENT EXPENDITURES	>				PAGE 52	OF FOR	120
NAME OF COMMITTEE (In Full)					FOR LINE 24		
Planned Parenthood Votes					ENTIFICATIO	N NUMB	ER V
				C	C00489799		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	= M /	D D /	Y = Y = Y	Y
Full Name of Payee		Memo	Item Date	of Public	: Distribution/[Dissemina	ation
Planned Parenthood Advocates of Ohio	1		l r	M M /	06	Y Y 201	
Mailing Address 206 E State St.			A				
			Amou	int			
City	State	Zip Code				3237.	53
Columbus	ОН	43215			D: B625111 rsement or O	bligation	
Purpose of Expenditure Phone Calls		Category/ Type 004		M M /	09	201	
Name of Federal Candidate:		✗ Support	Office Sough	ht·	House [District:	
Strickland, Ted, , ,		Oppose	Presid		Senate	State:	ОН
Calendar Year-To-Date			Disbursemer	nt For:	Primary	X G	eneral
Per Election for Office Sought		798633.79	2016	Other (sp	ecify) ▶		
Full Name of Payee		☐ Memo	1 -		: Distribution/[Dissemina	ation
Planned Parenthood Advocates of C	hio		l r	M M /	06	y y 201	YYY
Mailing Address 206 E State St.				09	06	201	0
200 L State St.			Amou	ınt			
City	State	Zip Code		1.0		3237.	54
Columbus	ОН	43215	Tran	saction I	ID: B625112 rsement or O	hligation	
Purpose of Expenditure		Category/		M M /	D D /	Y	
Phone Calls		Type 004	IJ L	09	09	201	6
Name of Federal Candidate:		Support	Office Sough	ht:	House [District: _	
Portman, Rob, , ,		x Oppose	Presid	_	Senate	State: _	ОН
Calendar Year-To-Date		700022 70	Disbursemer	nt For:	Primary	X G	eneral
Per Election for Office Sought		798633.79	2016	Other (sp	ecify) ►		
•							
(a) SUBTOTAL of Itemized Independent Expenditure	S			1 (2)		6475.0	7
							_
(a) SUBTOTAL of Unitemized Independent Expenditu	ıres		· •				
(a) TOTAL leader as deat Farmer discuss							
(a) TOTAL Independent Expenditures			•	1_7_			
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized						
Gustafson, Liz, , ,	[Electronically Fil	led1 –	M M /	D D		Y Y	
0'	Lacca omeany I'll	Date	e 12	23	201	0	

TEMIZED INDEPENDENT EXPENDITORES				PAGE 53 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
Planned Parenthood Advocates of Ohio				09 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.			A	mount
City	State	Zip Code		6475.07
Columbus	ОН	43215	I	ransaction ID : B625113
Purpose of Expenditure Canvassing		Category/ Type 004		pate of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office S	ought: House District:
Clinton, Hillary, , ,		Oppose		resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburse 2016	ement For:
Full Name of Payee		☐ Memo	Item D	ate of Public Distribution/Dissemination
Planned Parenthood Advocates of Oh	110			09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.				mount
City	State	Zip Code		6475.07 Fransaction ID: B625114
Columbus	ОН	43215		late of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		M 09 / 09 / 2016
Name of Federal Candidate:		Support	Office S	ought: House District:
Trump, Donald, , ,		x Oppose	X PI	resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	T	2149965.77	Disburse 2016	ement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				12950.14
(a) SUBTOTAL of Unitemized Independent Expenditur	es		· •	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	ed1	M = M	/ D D / Y Y Y Y Y
Signature		_ Date	e 12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 54 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 206 E State St				09 / 06 / 2016
206 E State St.			Ar	mount
City	State	Zip Code		6475.07
Columbus	ОН	43215		ransaction ID : B625116 ate of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office So	ought: House District:
Strickland, Ted, , ,		Oppose		esident State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	798633.79	Disburse 2016	ment For:
Full Name of Payer		□ Mome	Itam D	ate of Public Distribution/Dissemination
Full Name of Payee Planned Parenthood Advocates of Ol	hio	∐ Memo	item D	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.				
			A	mount
City Columbus	State	Zip Code		6475.07 ransaction ID : B625117
	OH	43215		ate of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		09 / 09 / 2016
Name of Federal Candidate:		Support	Office So	ought: House District:
Portman, Rob, , ,		X Oppose	l	esident Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	798633.79	Disburse 2016	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures	·			12950.14
(a) SUBTOTAL of Unitemized Independent Expenditure	res		• •	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	[ed]	M = M	23 2016
Signature	- •	Date	e 12	2010

TEMIZED INDEPENDENT EXPENDITURE	S			PAGE 55 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
				C 000409733
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Advocates of Ohi	0		TN	09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.			Amou	nt
City	State	Zip Code		4316.71
Columbus	ОН	43215	I	action ID : B625118 of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004	N	09 / 09 / 2016
Name of Federal Candidate:		✗ Support	Office Sough	it: House District:
Clinton, Hillary, , ,		Oppose	x Preside	
Calendar Year-To-Date Per Election for Office Sought	, , ,	2149965.77	Disbursemen	t For: Primary X General
Full Name of Payee		☐ Memo	<u> </u>	of Public Distribution/Dissemination
Community Outreach Group LLC				M / D D / Y Y Y
Mailing Address 4440 Varrant Aug NUW #200			— L	09 06 2016
1110 Vermont Ave N.W. #300			Amou	nt
City	State	Zip Code	<u> П</u>	100000.00
Washington	DC	20005		saction ID : B625119 of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004	N.	08 / 031 / 2016
Name of Federal Candidate:		Support	Office Sough	it: House District:
Trump, Donald, , ,		X Oppose	X Preside	ent Senate State: US
Calendar Year-To-Date		2149965.77	Disbursemen	t For: Primary X General
Per Election for Office Sought	7	2149903.77	2016 C	ther (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditure	es		.	104316.71
(a) SUBTOTAL of Unitemized Independent Expendi	tures		•	7
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the indepen with, or at the request or suggestion of, any candi party committee) any political party committee or i	idate or authorized			
Gustafson, Liz, , ,	[Electronically Fi	led1	M = M /	
Signature	12ncuonicuny Fu	Date	e 12	23 2016

PAGE 56 OF 120 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee Community Outreach Group LLC 09 06 2016 Mailing Address 1110 Vermont Ave N.W. #300 Amount Zip Code 100000.00 City State DC 20005 Transaction ID: B625129 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing. Pre-paid on M9 report. 004 08 2016 Type Name of Federal Candidate: **X** Support Office Sought: House District: Clinton, Hillary, , , US Oppose **x** President Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 2149965.77 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Community Outreach Group LLC 2016 06 09 Mailing Address 1110 Vermont Ave N.W. #300 Amount 100000.00 City State Zip Code Washington Transaction ID: B625130 DC 20005 Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing. Pre-paid on M9 report. 004 31 2016 08 Type Name of Federal Candidate: **x** Support Office Sought: House District: McGinty, Katie, , , PΑ Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 2045878.96 2016 Per Election for Office Sought Other (specify) ▶ 200000.00 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gustafson, Liz,,, [Electronically Filed] 23 2016 Date Signature

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 57 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes			FI	EC IDENTIFICATION NUMBER ▼
Trainica Farchinoda Voics				C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repor	t filed on	M / D D / Y Y Y Y
Full Name of Payee Community Outreach Group LLC		☐ Memo I	M	
Mailing Address 1110 Vermont Ave N.W. #300			Amount	06 2016
	1 0: .	T = 0 1		00500.40
City	State	Zip Code		38508.42
Washington	DC	20005		tion ID : B625160 Disbursement or Obligation
Purpose of Expenditure Phone Calls. Pre-paid on M9 report.		Category/ Type 004	M 08	31 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Heck, Joseph, , ,		Coppose Special Coppose	President	NIV/
0.1.1.1.2.2.			Disbursement F	
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	2016	er (specify) >
Full Name of Payee Community Outreach Group LLC		☐ Memo I		Public Distribution/Dissemination
			09	
Mailing Address 1110 Vermont Ave N.W. #300			Amount	
City	State	Zip Code		12836.14
Washington	DC	20005	Transac	ction ID : B625161 Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004	M O8	
Name of Federal Candidate:		Support	Office Sought:	House District:
Heck, Joseph, , ,		x Oppose	President	□ NIV
Calendar Year-To-Date			Disbursement F	For: Primary X General
Per Election for Office Sought	7	550037.95	2016	er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				51344.56
(a) 30BTOTAL of itemized independent Experiorations			•	31344.30
(a) SUBTOTAL of Unitemized Independent Expenditu	res		>	
(a) TOTAL Independent Expenditures			.	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	M = M / D	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 58 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Training Faronanous votos				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Community Outreach Group LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1110 Vermont Ave N.W. #300			Amo	unt
City	State	Zip Code		12836.14
Washington	DC	20005		saction ID : B625162 of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 004		09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ht: House District:
Cortez-Masto, Catherine, , ,		Oppose	Presi	NIV/
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disburseme	ent For: Primary X General Other (specify) ▶
Full Name of Payee		 Memo	<u> </u>	of Public Distribution/Dissemination
Community Outreach Group LLC		₩ Wome		M M 09 06 2016
Mailing Address 1110 Vermont Ave N.W. #300				00 00 2010
			Amo	unt
City	State	Zip Code		12836.14
Washington	DC	20005		nsaction ID : B625163 of Disbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004		M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		Oppose	X Presi	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disburseme	ent For: Primary General
Total Electronical Control Control	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	S		• []	12836.14
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	[ed]	M = M /	23 2016
Signature	•	Date	12	2010

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 59 OF 12 FOR LINE 24 OF FORM	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER	
Planned Parenthood Votes			C C00489799	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y	Υ
Full Name of Payee Community Outreach Group LLC		X Memo	Item Date of Public Distribution/Dissemination	n
			09 / D06 / Y 2016	Y
Mailing Address 1110 Vermont Ave N.W. #300			Amount	
City	State	Zip Code	12836.14	П
Washington	DC	20005	Transaction ID : B625164 Date of Disbursement or Obligation	
Purpose of Expenditure Canvassing		Category/ Type 004	M M / D D / Y Y Y	Y
Name of Federal Candidate:		Support	Office Sought: House District:	
Trump, Donald, , ,		x Oppose	President Senate State: U	s
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursement For: Primary General Gene	eral
	, , , , , , , , , , , , , , , , , , , ,		Other (specify)	
Full Name of Payee Community Outreach Group LLC		∐ Memo	Item Date of Public Distribution/Disseminatio	n Y
Mailing Address 1110 Vermont Ave N.W. #300			Amount	_
				-
City Washington	State	Zip Code 20005	25672.28 Transaction ID : B625165	Ш
Purpose of Expenditure		Catagory	Date of Disbursement or Obligation	V
Events. Pre-paid on M9 report.		Category/ Type 004	08 31 2016	
Name of Federal Candidate:		✗ Support	Office Sought: House District:	
Clinton, Hillary, , ,		Oppose	President Senate State: Us	S
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursement For: ☐ Primary	eral
(a) SUBTOTAL of Itemized Independent Expenditures	S		. ▶ 25672.28	
(a) SUBTOTAL of Unitemized Independent Expenditu	res		>	Ш
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	[ed] Date	e 12 23 2016	
Signature				

PAGE 60 OF 120 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 Check if 24-hour report 48-hour report Amends report filed on New report Date of Public Distribution/Dissemination Full Name of Payee X Memo Item Community Outreach Group LLC 06 2016 Mailing Address 1110 Vermont Ave N.W. #300 Amount State Zip Code 100000.00 City DC 20005 Transaction ID: B625131 Washington Date of Disbursement or Obligation Purpose of Expenditure Category/ Canvassing 004 09 06 2016 Type Name of Federal Candidate: Support Office Sought: House District: Toomey, Pat, , , PA Oppose President **x** Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 2045878.96 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Planned Parenthood Pennsylvania Advocates 2016 06 Mailing Address 1514 North 2nd Street, Harrisburg, Amount 1875.00 City State Zip Code Harrisburg Transaction ID: B625138 PΑ 17102 Date of Disbursement or Obligation Purpose of Expenditure Category/ Phone Calls 004 06 2016 09 Type Name of Federal Candidate: Support Office Sought: House District: Toomey, Pat,,, PΑ Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 2045878.96 2016 Per Election for Office Sought Other (specify) ▶ 1875.00 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gustafson, Liz,,, [Electronically Filed] 23 2016 Date Signature

TEMIZED INDEPENDENT EXPENDITURES				PAGE 61 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	1 M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
Planned Parenthood Pennsylvania Advo	cates			M M / D D / Y Y Y Y Y Y O O O O O O O O O O O O O
Mailing Address 1514 North 2nd Street, Harrisburg,			A	mount
City	State	Zip Code		1875.00
Harrisburg	PA	17102		Fransaction ID : B625139 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		09 07 7 2016
Name of Federal Candidate:		X Support	Office S	Sought: House District:
McGinty, Katie, , ,		Oppose	P	resident State: PA
Calendar Year-To-Date Per Election for Office Sought	7	2045878.96	Disburs 2016	ement For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	Item [Date of Public Distribution/Dissemination
Planned Parenthood Pennsylvania A	dvocates	Wemo		M M / D D / Y Y Y
Mailing Address				09 06 2016
1514 North 2nd Street, Harrisburg,			A	mount
City	State	Zip Code		1875.00
Harrisburg	PA	17102		Transaction ID : B625140 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		09 07 2016
Name of Federal Candidate:		x Support	Office S	Sought: House District:
Clinton, Hillary, , ,		Oppose	X P	resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburs 2016	ement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				3750.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led] -	M = M	/ D D / Y Y Y Y Y Y Y 2016
Signature		Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 62 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street, Harrisburg,			l	09 / 06 / 2016
101111011112111		,	Amoi	
City	State	Zip Code		1875.00
Harrisburg	PA	17102		saction ID : B625141 of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		× Oppose	x Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2149965.77	Disburseme	ont For: Primary X General Other (specify) ▶
Full Name of Payee Planned Parenthood Pennsylvania Address	dvocates	☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street, Harrisburg,			Amou	unt
City Harrisburg	State PA	Zip Code 17102		937.50 nsaction ID : B625142
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 004	— I r	of Disbursement or Obligation M 09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		Oppose	X Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	<i>7 7</i>	2149965.77	Disburseme	ont For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures			• [2812.50
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led]	M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 63 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street, Harrisburg,			An	09 06 2016 nount
City	State	Zip Code	— Г	937.50
Harrisburg	PA	17102		ansaction ID : B625143 te of Disbursement or Obligation
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 004		M 09 / D D / Y Y Y Y Y Y 2016
Name of Federal Candidate:		✗ Support	Office So	ught: House District:
Clinton, Hillary, , ,		Oppose	x Pre	esident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburser 2016	ment For:
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Planned Parenthood Pennsylvania Ad	dvocates			09
Mailing Address 1514 North 2nd Street, Harrisburg,			An	nount
City	State	Zip Code	— Г	937.50
Harrisburg	PA	17102		ransaction ID : B625132 te of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004		M 09 / D 7 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: House District:
Trump, Donald, , ,		x Oppose	X Pre	esident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2149965.77	Disburser 2016	ment For:
(a) SUBTOTAL of Itemized Independent Expenditures				1875.00
(a) SUBTOTAL of Unitemized Independent Expenditur	es			
			· _	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gustafson, Liz, , ,	Electronically Fil	ledl -	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 64 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	-M / D D / Y = Y = Y
Edi Novo of Book			lı Doto	of Public Distribution/Dissemination
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	Memo	itom _	09 06 2016
Mailing Address 1514 North 2nd Street, Harrisburg,			Amou	
City	State	Zip Code	— Г	937.50
Harrisburg	PA	17102	I	saction ID : B625134 of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004		09 07 2016
Name of Federal Candidate:		X Support	Office Sough	ht: House District:
Clinton, Hillary, , ,		Oppose	✗ Presid	
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursement 2016	nt For:
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Pennsylvania A	dvocates			M M / D D / Y Y Y Y
Mailing Address				09 06 2016
1514 North 2nd Street, Harrisburg,			Amou	ınt
City	State	Zip Code	ΗГ.	937.50
Harrisburg	PA	17102		saction ID : B625135 of Disbursement or Obligation
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 004		09 / 07 / 2016
Name of Federal Candidate:		x Support	Office Soug	ht: House District:
McGinty, Katie, , ,		Oppose	Presid	lent Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2045878.96	Disbursement 2016	nt For:
•				
(a) SUBTOTAL of Itemized Independent Expenditures			· • [1875.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	[ed]	e 12	23 2016
Signature	*	Date	; 12	2010

TEMIZED INDEPENDENT EXPENDITURES				PAGE 65 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	1 = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Itom Date	of Public Distribution/Dissemination
Planned Parenthood Pennsylvania Advo	cates	□ Memo	itom	09 / 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,			Amou	unt
City	State	Zip Code	$ \Gamma$	937.50
Harrisburg	PA	17102		saction ID : B625136 of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Toomey, Pat, , ,		X Oppose	Presid	dent Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2045878.96	Disburseme 2016	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Pennsylvania Ad	dvocates		_ r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,				09 00 2010
1314 Notti Zild Street, Hamsburg,			Amou	unt
City	State	Zip Code	—IГ.	937.50
Harrisburg	PA	17102		of Disbursement or Obligation
Purpose of Expenditure Consultant: strategy and messaging		Category/ Type 004] [M 09 / 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Toomey, Pat, , ,		X Oppose	Presio	dent Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2045878.96	Disburseme	nt For:
•				
(a) SUBTOTAL of Itemized Independent Expenditures			· •	1875.00
(a) SUBTOTAL of Unitemized Independent Expenditur	es			
(a) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gustafson, Liz, , ,	Electronically Fil	led]	e 12	23 2016
Signature	•	Date	7 12	2010

TEMIZED INDEPENDENT EXPENDITURES				PAGE 66 OF 120		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes				C C00489799		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed or	M = M / D = D / Y = Y = Y		
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item C	Date of Public Distribution/Dissemination		
Mailing Address 1514 North 2nd Street, Harrisburg,			Δ	09 06 2016 Imount		
City	State	Zip Code		937.50		
Harrisburg	17100			Transaction ID : B625192 Date of Disbursement or Obligation		
Purpose of Expenditure Events		Category/ Type 004	4	09 07 7 2016		
Name of Federal Candidate:		✗ Support	Office S	Sought: House District:		
McGinty, Katie, , ,		Oppose	P	resident Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2045878.96	Disburs 2016	ement For: Primary X General Other (specify) ▶		
Full Name of Payee		☐ Memo	Item C	Date of Public Distribution/Dissemination		
Planned Parenthood Pennsylvania A	dvocates			08		
Mailing Address 1514 North 2nd Street, Harrisburg,			A	mount		
City	State	Zip Code		1562.50		
Harrisburg	PA	17102	I	Transaction ID : B621998 Date of Disbursement or Obligation		
Purpose of Expenditure Full payment of transaction B621998 originally report. See Schedule D	orted on	Category/ Type 004		09 / D D D D 2016		
Name of Federal Candidate:		Support	Office S	Sought: House District:		
Toomey, Pat, , ,		X Oppose	P	resident Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought	7 7	2045878.96	Disburse 2016	ement For: Primary General Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures				2500.00		
(a) SUBTOTAL of Unitemized Independent Expenditure	100		. г			
(a) SOBTOTAL OF OFFICE Macpendent Expenditure	03					
(a) TOTAL Independent Expenditures				1 1 7 1 1 7 1 1 7		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
Gustafson, Liz, , ,	Electronically Fil	led]	M = M	/ D D / Y Y Y Y Y		
Signature		Date	e 12	23 2016		

TEMIZED INDEPENDENT EXPENDITURES			
TEMIZED INDEPENDENT EXPENDITORES			PAGE 67 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			
			C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repor	t filed on M M M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo I	tem Date of Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street, Harrisburg,			08 09 2016 Amount
Cit.	Ctata	Zin Codo	1562.50
City	State	Zip Code	1562.50 Transaction ID : B621999
Harrisburg	risburg PA 17102		
Purpose of Expenditure Full payment of transaction B621999 originally report 2016 FEC M9 report. See Schedule D	ted on	Category/ Type 004	09 07 7 2016
Name of Federal Candidate:		Support	Office Sought: House District:
Toomey, Pat, , ,		x Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7	2045878.96	Disbursement For: Primary General 2016 Other (specify) ▶
Planned Parenthood Pennsylvania AdMailing Address 1514 North 2nd Street, Harrisburg,			M 08 / D 09 / Y 2016 Amount
City	State	Zip Code	1562.50
Harrisburg	PA	17102	Transaction ID : B622000
Purpose of Expenditure Full payment of transaction B622000 originally report 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Toomey, Pat, , ,		x Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	1 1 1	2045878.96	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures			3125.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		>
(a) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	·
Gustafson, Liz, , ,	Electronically Fil	<i>led]</i> Date	12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES			PAGE 68 OF 120 FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes	C C00489799			
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on M M / D D / Y Y Y Y	
Full Name of Payee Planned Parenthood Pennsylvania Advo	Item Date of Public Distribution/Dissemination			
Mailing Address 1514 North 2nd Street, Harrisburg,			08 09 2016 Amount	
		l =	1562.50	
City Harrisburg	State Zip Code burg PA 17102			
Purpose of Expenditure Full payment of transaction B622001 originally report 2016 FEC M9 report. See Schedule D	Full payment of transaction B622001 originally reported on Category 004			
Name of Federal Candidate:		Support	Office Sought: House District:	
Toomey, Pat, , ,		x Oppose	President State: PA	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2016 Char (possify)			
			Other (specify)	
Full Name of Payee Planned Parenthood Pennsylvania Ad	Item Date of Public Distribution/Dissemination			
Mailing Address 1514 North 2nd Street, Harrisburg,			08 09 2016 Amount	
City	State	Zip Code	1562.50	
Harrisburg	PA	Transaction ID : B622002 Date of Disbursement or Obligation		
Purpose of Expenditure Full payment of transaction B622002 originally reported on 2016 FEC M9 report. See Schedule D Category/ Type 004			09 / 07 / 2016	
Name of Federal Candidate:		✗ Support	Office Sought: House District:	
McGinty, Katie, , ,				
Calendar Year-To-Date Per Election for Office Sought	20/15/27/2 06			
(a) SUBTOTAL of Itemized Independent Expenditures			. > 3125.00	
(a) SUBTOTAL of Unitemized Independent Expenditur	es			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Gustafson, Liz, , ,	Electronically Fil	led1	M = M / D = D / Y = Y = Y	
Signature	<u>ысы описану Ри</u>	Date	e 12 23 2016	

TEMIZED INDEPENDENT EXPENDITURES	6			PAGE 69 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes		C00489799		
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	/
Full Name of Payee				Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street, Harrisburg,				09 2016
			Amount	
City	State	Zip Code		1562.50
Harrisburg Purpose of Expenditure	PA	17102		tion ID: B622003 Disbursement or Obligation
Full payment of transaction B622003 originally rep 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004	09	
Name of Federal Candidate:		X Support	Office Sought:	House District:
McGinty, Katie, , ,		Oppose	President	Senate State: PA
Calendar Year-To-Date		2045878.96	Disbursement F	or: Primary Seneral
Per Election for Office Sought	7 7	20 1007 0.00	Othe	er (specify)
Full Name of Payee				Public Distribution/Dissemination M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,				
City	State	Zip Code	-	1562.50
Harrisburg				tion ID : B622004 Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622004 originally reported on 2016 FEC M9 report. See Schedule D Category/ Type 004				0 07 2016
Name of Federal Candidate:		✗ Support	Office Sought:	House District:
McGinty, Katie, , ,				Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	20/15/27/2 06			or: Primary X General or (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		.	3125.00
(a) SUBTOTAL of Unitemized Independent Expendit	ures		>	777
(a) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candiparty committee) any political party committee or it	date or authorized			
Gustafson, Liz, , ,	[Electronically Fi	led] _	and the second	2016
Signature		Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 70 OF 120	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full) Planned Parenthood Votes FEC IDENTIFICATION NUMBER ▼					
Trainled Farenthood votes				C C00489799	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Full Name of Payee Planned Parenthood Pennsylvania Advo	Item C	Date of Public Distribution/Dissemination 08 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1514 North 2nd Street, Harrisburg,			А	Amount	
City	State	Zip Code		1562.50	
Harrisburg	PA	17102		Transaction ID : B622005 Date of Disbursement or Obligation	
Purpose of Expenditure Full payment of transaction B622005 originally repo 2016 FEC M9 report. See Schedule D	Full payment of transaction B622005 originally reported on Category 004				
Name of Federal Candidate:		X Support	Office S	Sought: House District:	
McGinty, Katie, , ,		Oppose		resident Senate State: PA	
Calendar Year-To-Date Per Election for Office Sought	, ,	2045878.96	Disburse 2016	ement For:	
Full Name of Payee Planned Parenthood Pennsylvania A	dvocates	☐ Memo	Item D	Date of Public Distribution/Dissemination	
Mailing Address 1514 North 2nd Street, Harrisburg,			Д	mount	
City	State	Zip Code		1562.50	
Harrisburg PA 17102				Transaction ID : B622006 Date of Disbursement or Obligation	
Purpose of Expenditure Full payment of transaction B622006 originally reported on 2016 FEC M9 report. See Schedule D Category/ Type 004 09 07 20					
Name of Federal Candidate:		x Support	Office S	Sought: House District:	
Clinton, Hillary, , ,		Oppose	X P	resident Senate State: US	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disburse 2016	ement For: ☐ Primary X General Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	í		•	3125.00	
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•		
(a) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•	
Gustafson, Liz, , ,	[Electronically Fil	led] Date	M M M	23 2016	

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Date

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 71 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes	FEC IDENTIFICATION NUMBER ▼			
				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item Date	of Public Distribution/Dissemination 08 09 7 2016
Mailing Address 1514 North 2nd Street, Harrisburg,			Amou	
City	State	Zip Code		1562.50
Harrisburg	PA	17102		saction ID : B622007 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622007 originally report 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004		09 07 2016
Name of Federal Candidate:		X Support	Office Sough	nt: House District:
Clinton, Hillary, , ,		Oppose	✗ Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disbursemer 2016	nt For: Primary
Full Name of Payee Planned Parenthood Pennsylvania Ad Mailing Address 1514 North 2nd Street, Harrisburg,	dvocates	☐ Memo		of Public Distribution/Dissemination 08 / 09 / 2016 nt
City	State	Zip Code		1562.50
Harrisburg	PA	17102		saction ID : B622008 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622008 originally report 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004		09 07 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	nt: House District:
Clinton, Hillary, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disbursemer 2016	nt For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditure				3125.00
(-,				
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Gustafson, Liz, , ,	Electronically Fil	led] Date	m m /	23 / 2016

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 72 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes		FEC IDENTIFICATION NUMBER ▼		
Trainied Farenthood votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item Date	of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,			Amo	
City	State	Zip Code	-	1562.50
Harrisburg	PA	17102		saction ID : B622009 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622009 originally report 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004	_	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	aht: House District:
Clinton, Hillary, , ,		Oppose	resi	
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburseme	ent For:
Full Name of Payee Planned Parenthood Pennsylvania Ad Mailing Address 1514 North 2nd Street, Harrisburg,	dvocates	☐ Memo	Item Date	of Public Distribution/Dissemination M 08
011	To: .	7: 0 !		4563.50
City Harrisburg	State PA	Zip Code 17102	Tra	nsaction ID : B622010 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622010 originally repo	orted on	Category/ Type 004		09 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Trump, Donald, , ,		X Oppose	X Presi	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disburseme 2016	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			· [3125.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	[ed] Dots	M = M	23 2016

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 73 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Thannou Farenaneea Vetee				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo		" M / D " D / Y " Y " Y " Y
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	Item Date o	of Public Distribution/Dissemination
Mailing Address 1514 North 2nd Street Herrichurg			L	08 09 2016
1514 North 2nd Street, Harrisburg,			Amour	nt
City	State	Zip Code		1562.50
Harrisburg	PA	17102	Trans	action ID : B622011 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622011 originally report 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004	M	09 07 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
Trump, Donald, , ,		x Oppose	x Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursement 2016 O	t For: Primary
Full Name of Payee Planned Parenthood Pennsylvania Ad Mailing Address 1514 North 2nd Street, Harrisburg,		☐ Memo	Item Date of Management Amour	of Public Distribution/Dissemination
City	State	Zip Code	<u> —</u> Г	1562.50
Harrisburg	PA	17102		action ID : B622012
Purpose of Expenditure Full payment of transaction B622012 originally repo	orted on	Category/ Type 004	Date	of Disbursement or Obligation 09 07 07 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
Trump, Donald, , ,		x Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	<i>*</i>	2149965.77	Disbursemen 2016 O	t For: Primary X General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			.	3125.00
(a) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(a) TOTAL Independent Expenditures			· [7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	M = M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 74 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
			C C00489799
Check if 24-hour report 48-hour report	New rep	oort Amends repo	ort filed on
Full Name of Payee Planned Parenthood Pennsylvania Advo	cates	☐ Memo	M M / D D / Y Y Y Y
Mailing Address 1514 North 2nd Street, Harrisburg,			08 09 2016 Amount
City	State	Zip Code	1562.50
	PA	17102	Transaction ID : B622013
Harrisburg		17102	Date of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B622013 originally repo 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004	09 / 07 / 2016
Name of Federal Candidate:		Support	Office Sought: House District:
Trump, Donald, , ,		✗ Oppose	▼ President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursement For: Primary ✓ General Other (specify) ✓
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
76 Words			09 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1806 Vernon Street, Ste. #100			
			Amount
City	State	Zip Code	11100.00
Washington	DC	20009	Transaction ID : B625367 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ad Production		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Heck, Joseph, , ,		X Oppose	President Senate State: NV
Calendar Year-To-Date			Disbursement For:
Per Election for Office Sought	7-1-7-	550037.95	2016
(a) SUBTOTAL of Itemized Independent Expenditures	·		12662.50
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•
(a) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•	·
Gustafson, Liz, , ,	[Electronically Fil	led]	12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
0: 1		Date	23 2016

TEMIZED INDEFENDENT EXPENDITORES	,			PAGE 75 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
76 Words				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1806 Vernon Street, Ste. #100			Ar	nount
City	State	Zip Code	— [33141.97
Washington	DC	20009		ransaction ID : B625368 ate of Disbursement or Obligation
Purpose of Expenditure Digital Ad Production and Commission		Category/ Type 004		09
Name of Federal Candidate:		Support	Office So	pught: House District:
Heck, Joseph, , ,		X Oppose		esident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		550037.95	Disburse 2016	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Bully Pulpit Interactive				09 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1140 Connecticut Ave NW #800			Ar	nount
City	State	Zip Code	— I	226957.00
Washington	DC	20036		ransaction ID : B625369 ate of Disbursement or Obligation
Purpose of Expenditure Digital Ad Buy		Category/ Type 004		M 09 / D2 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ought: House District:
Heck, Joseph, , ,		X Oppose	Pre	esident State: NV
Calendar Year-To-Date Per Election for Office Sought	4	550037.95	Disburse 2016	ment For: Primary
(a) SUBTOTAL of Itemized Independent Expenditure	9S			260098.97
(a) SUBTOTAL of Unitemized Independent Expendit	ures		•	7 7 7
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or it	date or authorized	•		•
Gustafson, Liz, , ,	[Electronically File	[ed] Date	e 12	23 2016
Signature				للنتيا للباا

TEMIZED INDEPENDENT EXPENDITURES				PAGE 76 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M
Full Name of Payee		X Memo	Item Date	of Public Distribution/Dissemination
Itzamna Translations Company			1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 1015			A === ==	
			Amou	ant
City	State	Zip Code		44.07
Glendale	AZ	85311		saction ID: B625370 of Disbursement or Obligation
Purpose of Expenditure Translation services		Category/ Type 004		M M / D D / Y Y Y Y Y Y Y O O O O O O O O O O O O
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Heck, Joseph, , ,		× Oppose	Presid	NIV/
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disburseme	nt For: Primary X General Other (specify) ▶
Full Name of Payee		□ Mama		of Public Distribution/Dissemination
Planned Parenthood Pennsylvania A	dvocates	∐ Memo	item Date	M M / D D / Y Y Y Y
Mailing Address			[09 08 2016
1514 North 2nd Street			Amou	unt
City	State	Zip Code	$-\Gamma$	730.00
Harrisburg	PA	17102		saction ID : B625371 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
Facility Rental		Type 003		09 08 2016
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Heck, Joseph, , ,		x Oppose	Presid	lent State: NV Senate
Calendar Year-To-Date		550037.95	Disburseme	nt For: Primary 🕱 General
Per Election for Office Sought	7 7	330037.93	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· • []	730.00
(a) SUBTOTAL of Unitemized Independent Expenditur	es		· •	19191
(a) TOTAL Independent Expenditures				
(4)				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	led1 -	M = M /	D D / Y Y Y Y Y
Signature		Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 77 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee SKDKnickerbocker		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1150 18th St., NW #800			Amo	09 12 2016
City	State	Zip Code		500844.00
Washington	DC	20036	Tran	nsaction ID : B625999
Purpose of Expenditure				e of Disbursement or Obligation
Television Ad Buy		Category/ Type 004		09 / 08 / 2016
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Trump, Donald, , ,		x Oppose	x Presi	ident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disburseme	ent For:
Full Name of Payee SKDKnickerbocker		☐ Memo	1_	e of Public Distribution/Dissemination
SKDKIlickelbockel				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1150 18th St., NW #800			Amo	ount
City	State	Zip Code	— Г	500844.00
Washington	DC	20036		nsaction ID : B626000 e of Disbursement or Obligation
Purpose of Expenditure Television Ad Buy		Category/ Type 004		09 / 08 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Ayotte, Kelly, , ,		X Oppose	Presi	N⊔
Calendar Year-To-Date Per Election for Office Sought	1 1 1	687249.22	Disburseme 2016	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			· L	1001688.00
(a) SUBTOTAL of Unitemized Independent Expenditure	'es		· [
(a) TOTAL Independent Expenditures			• <u>_</u>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically File	[ed] Date	M M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 78	
NAME OF COMMITTEE (In Full)				<u> </u>	24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICAT	ION NUMBER ▼
Tiamioa Falonaroda Volco				C C00489799)
Check if 24-hour report 48-hour report	New repo	port Amends repo	ort filed on	= M / D = D /	YYYYY
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo	Item Date of	of Public Distribution	/Dissemination
Mailing Address 206 E State St.				08 02	2016
			Amour	nt	
City	State	Zip Code	TI:		8912.13
Columbus	ОН	43215		action ID : B621425 of Disbursement or	
Purpose of Expenditure Full payment of transaction B621425 originally repo 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004		09 / 09	2016
Name of Federal Candidate:		✗ Support	Office Sough	t: House	District:
Clinton, Hillary, , ,		Oppose	X Preside		State: US
Calendar Year-To-Date			Disbursemen		
Per Election for Office Sought		2149965.77	2016	ther (specify) ▶	y Conorai
Full Name of Payee Planned Parenthood Advocates of O	hio	☐ Memo		of Public Distribution	/Dissemination
Figure 1 architiou / avocates 5. 5.			M	08 / 02 /	2016
Mailing Address 206 E State St.			Amour	nt	
City	State	Zip Code	— Г		8912.13
Columbus	ОН	43215	Trans	saction ID : B621420 of Disbursement or	6
Purpose of Expenditure Full payment of transaction B621426 originally rep 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004	M	09 / 09 /	2016
Name of Federal Candidate:		Support	Office Sough	t: House	District:
Trump, Donald, , ,		x Oppose	X Preside		State: US
Calendar Year-To-Date Per Election for Office Sought	1 1	2149965.77	Disbursemen 2016 O	t For: Primar	y X General
(a) SUBTOTAL of Itemized Independent Expenditures					17824.26
(a) SOBTOTAL OF Remized independent Expenditures			- 1		17024.20
(a) SUBTOTAL of Unitemized Independent Expenditu	res		>		
(a) TOTAL Independent Expenditures			•		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized				
Gustafson, Liz, , ,	[Electronically Fil	[led] Date	12		16

PAGE 79 OF 120 FOR LINE 24 OF FORM 3X NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼ Planned Parenthood Votes C00489799 Check if 24-hour report 48-hour report Amends report filed on New report Full Name of Payee Date of Public Distribution/Dissemination Planned Parenthood Advocates of Ohio 02 2016 Mailing Address 206 E State St. Amount State Zip Code 8912.13 City ОН 43215 Transaction ID: B621427 Columbus Date of Disbursement or Obligation Purpose of Expenditure Category/ Full payment of transaction B621427 originally reported on 004 09 09 2016 Type 2016 FEC M9 report. See Schedule D Name of Federal Candidate: **X** Support Office Sought: House District: Strickland, Ted. . . OH Oppose President **x** Senate State: Disbursement For: Primary **X** General Calendar Year-To-Date 798633.79 2016 Per Election for Office Sought Other (specify) ▶ Full Name of Payee Date of Public Distribution/Dissemination Memo Item Planned Parenthood Advocates of Ohio 2016 08 02 Mailing Address 206 E State St. Amount 8912.13 City State Zip Code Columbus Transaction ID: B621428 ОН 43215 Date of Disbursement or Obligation Purpose of Expenditure Category/ Full payment of transaction B621428 originally reported on 004 2016 09 Type 2016 FEC M9 report. See Schedule D Name of Federal Candidate: Support Office Sought: House District: Portman, Rob, , , OH X Oppose President **X** Senate State: **X** General Disbursement For: Primary Calendar Year-To-Date 798633.79 2016 Per Election for Office Sought Other (specify) ▶ 17824.26 (a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditures..... (a) TOTAL Independent Expenditures Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Gustafson, Liz,,, [Electronically Filed] 23 2016 Date Signature

SCHEDULE E (FEC FOIII 3X)			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 80 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			
Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repor	rt filed on M M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo I	M M / D D / Y Y Y Y
Mailing Address 206 E State St.			08 02 2016 Amount
City	State	Zip Code	4456.07
Columbus	OH	43215	Transaction ID : B621429
	L		Date of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621429 originally repor 2016 FEC M9 report. See Schedule D	ted on	Category/ Type 004	09 / 09 / 2016
Name of Federal Candidate:		Support	Office Sought: House District:
Portman, Rob, , ,		X Oppose	President X Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	798633.79	Disbursement For: ☐ Primary X General 2016 ☐ Other (specify) ▶
Full Name of Payee Planned Parenthood Advocates of Oh Mailing Address 200 F State St	าเ่อ	☐ Memo I	Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
206 E State St.			Amount
City	State	Zip Code	4456.07
Columbus	ОН	43215	Transaction ID : B621430 Date of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621430 originally report 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004	09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sought: House District:
Strickland, Ted, , ,		Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		798633.79	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures			8912.14
(a) SUBTOTAL of Unitemized Independent Expenditur	es		>
(a) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	•
Gustafson, Liz, , ,	[Electronically File	led] Data	12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
0.		Date	12 20 2010

TEMIZED INDEPENDENT EXPENDITORES				PAGE 81 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Advocates of Ohio				08
Mailing Address 206 E State St.			Amou	
City	State	Zip Code	— I Г	4456.07
Columbus	ОН	43215	I	saction ID : B621431 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621431 originally report 2016 FEC M9 report. See Schedule D	ted on	Category/ Type 004		09 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		X Oppose	x Presid	lent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursemen 2016	nt For:
Full Name of Payee	_	Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Advocates of Oh	nio			08 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 206 E State St.				
			Amou	ınt
City	State	Zip Code		4456.07
Columbus	ОН	43215		saction ID : B621432 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621432 originally report 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004		09 / 09 / 2016
Name of Federal Candidate:		x Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		Oppose	X Presid	lent Senate State: US
Calendar Year-To-Date		2149965.77	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7-1-5-	214000.77	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [8912.14
(a) SUBTOTAL of Unitemized Independent Expenditur	es		· •	
(a) TOTAL Independent Expenditures			· •	.,,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gustafson, Liz, , ,	Electronically Fil	ed1	M = M /	
Signature		_ Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 82 OF 120
NAME OF COMMITTEE (In Full)			1	FOR LINE 24 OF FORM 3X
Planned Parenthood Votes			FEC	IDENTIFICATION NUMBER ▼
Transcar archinoda votes			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	/ D D / Y Y Y Y
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo	M = M	lic Distribution/Dissemination
Mailing Address 206 E State St.			08 Amount	02 2016
City	State	Zip Code		5941.41
Columbus	OH	43215	Transaction	ID : B621444
Purpose of Expenditure			Date of Disb	oursement or Obligation
Full payment of transaction B621444 originally report 2016 FEC M9 report. See Schedule D	ted on	Category/ Type 004	09	09 / 2016
Name of Federal Candidate:		✗ Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	✗ President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursement For:	Primary General Specify) ▶
Full Name of Payee Planned Parenthood Advocates of Oh Mailing Address 206 E State St.	nio	☐ Memo	07	lic Distribution/Dissemination
			Amount	
City	State	Zip Code		4256.41
Columbus	ОН	43215		n ID : B621105 oursement or Obligation
Purpose of Expenditure Full payment of transaction B621105 originally repo 2016 FEC M8 report. See Schedule D	orted on	Category/ Type 004	09 09	09 / 2016
Name of Federal Candidate:		x Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	X President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursement For: 2016 Other (s	Primary
(a) SUBTOTAL of Itemized Independent Expenditures			.	10197.82
(a) SUBTOTAL of Unitemized Independent Expenditure	əs		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Gustafson, Liz, , , [1	Electronically Fil	<i>led]</i> Date	12 / 23	2016

TEMIZED INDEPENDENT EXPENDITURI	ΞS			PAGE 83 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Tianned Farentineed Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	port Amends repo		M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Advocates of Oh	nio	☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 206 E State St.			Amou	
City	State	Zip Code	— r	4256.41
Columbus	OH	43215	Trans	saction ID : B621106
	Un	43213		of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621106 originally re 2016 FEC M8 report. See Schedule D	ported on	Category/ Type 004		09 09 / 2016
Name of Federal Candidate:		Support	Office Sough	ht: House District:
Trump, Donald, , ,		Cupport Oppose	resid	
College days Many To Date			Disburseme	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	2016	Other (specify) ▶
Full Marra of Doyco		□ Mana	1 _	
Full Name of Payee Planned Parenthood Advocates of	Ohio	∐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 206 E State St.				07 20 20.0
	100-1-	7 0-1-	Amou	4256.41
City	State	Zip Code		
Columbus	ОН	43215		saction ID : B621107 of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621107 originally 2016 FEC M8 report. See Schedule D	reported on	Category/ Type 004		09 / 09 / 2016
Name of Federal Candidate:		✗ Support	Office Sough	ht: House District:
Strickland, Ted, , ,		Oppose	Presid	
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought		798633.79	2016 —	Other (specify) ▶
				other (specify)
(a) SUBTOTAL of Itemized Independent Expenditu	res		· [8512.82
(a) SUBTOTAL of Unitemized Independent Expendent	ditures		•	
(a) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the indepe with, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
Gustafson, Liz, , ,	[Electronically Fi	iled1	M = M /	
Signaturo		Date	12	23 2016

SCHEDULE E (FEC Form 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 84 OF 120
NAME OF COMMITTEE (In Full)			T	FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				C IDENTIFICATION NUMBER ▼
				C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	/ D D / Y Y Y
Full Name of Payee Planned Parenthood Advocates of Ohio		☐ Memo	tem Date of P	
Mailing Address 206 E State St			07	29 2016
206 E State St.			Amount	
City	State	Zip Code		4256.41
Columbus	ОН	43215		ion ID : B621108 isbursement or Obligation
Purpose of Expenditure Full payment of transaction B621108 originally report 2016 FEC M8 report. See Schedule D	rted on	Category/ Type 004	09	
Name of Federal Candidate:		Support	Office Sought:	House District:
Portman, Rob, , ,		Cupport Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 1 7	798633.79	Disbursement Fo	or: Primary X General
Full Name of Payee Planned Parenthood Advocates of Of Mailing Address 206 E State St.	nio	☐ Memo	Date of P 07 Amount	ublic Distribution/Dissemination y y y y y y y y y y y y y y y y y y y
Oit.	Otata	Zin Code		1891.73
City Columbus	State	Zip Code 43215		ion ID : B621109 isbursement or Obligation
Purpose of Expenditure Full payment of transaction B621109 originally repo	orted on	Category/ Type 004	Date of E	
Name of Federal Candidate:		X Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	X President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	2149965.77	Disbursement Fo	or: Primary ✓ General ✓ (specify) ✓
(a) SUBTOTAL of Itemized Independent Expenditures			·	6148.14
(a) SUBTOTAL of Unitemized Independent Expenditure	'es		•	
(a) TOTAL Independent Expenditures			•	, , , , , , , , ,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	M M / D	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 85 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Blueprint Interactive				09 12 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2229 North Pollard St			Ar	nount
City	State	Zip Code	— I	66400.00
Arlington	VA	22207		ansaction ID : B625996
Purpose of Expenditure		Catagory	Da	ate of Disbursement or Obligation
Digital Ad Buy and Commission		Category/ Type 004		09 12 2016
Name of Federal Candidate:		Support	Office Sc	ought: House District:
Trump, Donald, , ,		x Oppose	x Pre	esident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburse 2016	ment For:
Full Name of Payee		Memo	Itom Da	ate of Public Distribution/Dissemination
Blueprint Interactive		Memo	item 50	M M / D D / Y Y Y Y
Mailing Address				09 12 2016
2229 North Pollard St			Ar	nount
City	State	Zip Code		66400.00
Arlington	VA	22207		ransaction ID: B625997 ate of Disbursement or Obligation
Purpose of Expenditure Digital Ad Buy and Commission		Category/ 004		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signal Ad Bay and Gonimission		Type 004		09 12 2010
Name of Federal Candidate:		Support	Office So	ought: House District:
Ayotte, Kelly, , ,		x Oppose	Pre	esident Senate State: NH
Calendar Year-To-Date		687249.22		ment For: Primary 🗶 General
Per Election for Office Sought	7 7	007249.22	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				132800.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		· • _	
(a) TOTAL Independent Expenditures			, г	
(a) 10 112 maoponasin Exponential et				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	'ed1 _	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	c.u.omouny I'u	_ Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES	3			PAGE 86 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Transca Farentineed Vetee				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Action Fund Inc.		☐ Memo	Item D	ate of Public Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			A	mount
City	State	Zip Code	— r	182.94
New York	NY	10038		ransaction ID : B629971 ate of Disbursement or Obligation
Purpose of Expenditure Direct voter contact-staff time; see Line 21b		Category/ Type 001		09 / 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District:
Toomey, Pat, , ,		X Oppose	l —	esident Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	7 7	2045878.96	Disburse	ement For:
Full Name of Payee Planned Parenthood Action Fund Inc	c.	☐ Memo	Item D	ate of Public Distribution/Dissemination
123 William St, 10th Floor			A	mount
City	State	Zip Code		182.94
New York	NY	10038		ransaction ID : B628829 ate of Disbursement or Obligation
Purpose of Expenditure Direct voter contact-staff time; see Line 21b		Category/ Type 001		M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office S	ought: House District:
Ayotte, Kelly, , ,		X Oppose		esident Senate State: NH
Calendar Year-To-Date Per Election for Office Sought	7 7	687249.22	Disburse 2016	ement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditure	·s		•	365.88
(a) SUBTOTAL of Unitemized Independent Expendit	ures		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	date or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led]	M = M	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC FORM 3X)				
TEMIZED INDEPENDENT EXPENDITURES				PAGE 87 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Action Fund Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			Amo	09 13 2016 unt
City	State	Zip Code	<u> </u>	182.94
New York	NY	10038		nsaction ID : B629963 of Disbursement or Obligation
Purpose of Expenditure Direct voter contact-staff time; see Line 21b		Category/ Type 001	_	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	aht: House District:
Heck, Joseph, , ,		Cupport Oppose	Presi	NIV
Calendar Year-To-Date Per Election for Office Sought	7 7	550037.95	Disburseme	ent For: Primary
Full Name of Payee Planned Parenthood Action Fund Inc. Mailing Address 123 William St, 10th Floor		☐ Memo	Item Date	of Public Distribution/Dissemination M 09
City	State	Zip Code	$ \Gamma$	182.94
New York	NY	10038	II.	nsaction ID : B629968 of Disbursement or Obligation
Purpose of Expenditure Direct voter contact-staff time; see Line 21b		Category/ Type 001		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ght: House District:
Portman, Rob, , ,		X Oppose	Presi	dent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	798633.79	Disburseme	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures			, F.	365.88
(a) SUBTOTAL of Unitemized Independent Expenditur	es		-	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 88 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	e of Public Distribution/Dissemination
Planned Parenthood Action Fund Inc.				09 / D D / Y Y Y Y Y 2016
Mailing Address 123 William St, 10th Floor			Amo	ount
City	State	Zip Code	-	182.94
New York	NY	10038		nsaction ID : B633615 e of Disbursement or Obligation
Purpose of Expenditure Direct voter contact - staff time; see Line 21b		Category/ Type 001		09 13 / 2016
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Burr, Richard, , ,		x Oppose	Presi	dent Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	7	182.94	Disburseme 2016	ent For: Primary X General Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Planned Parenthood Advocates Mar	Monte			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1605 The Alameda			Amo	ount
City	State	Zip Code	—г	897.90
San Jose	CA	95126	I	nsaction ID : B625179 e of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004		09 / 14 / 2016
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District:
Clinton, Hillary, , ,		Oppose	X Presi	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disburseme	,
				Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1080.84
(a) SUBTOTAL of Unitemized Independent Expenditure	es			
(a) TOTAL Independent Expenditures			· • [7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	led]	e 12	23 2016
Signature	<u> </u>	Date	12	2010

TEMPER MADE ENDERN EXILENDITORED				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				· · · · · · · · · · · · · · · · · · ·
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends rep	port filed	on M M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Advocates Mar Mor	nte	☐ Memo	o Item	Date of Public Distribution/Dissemination
Maillian Address				09 06 2016
Mailing Address 1605 The Alameda				Amount
City	State	Zip Code		897.90
San Jose	CA	95126		Transaction ID : B625181 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 00	04	09 14 2016
Name of Federal Candidate:		Support	Office	e Sought: House District:
Trump, Donald, , ,		x Oppose		President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	2149965.77	Disbu 2016	ursement For: ☐ Primary X General Other (specify) ▶
Full Name of Payee		Memo	o Item	Date of Public Distribution/Dissemination
Planned Parenthood Advocates Mar I	Monte			09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1605 The Alameda				Amount
City	State	Zip Code		897.90
San Jose	CA	95126		Transaction ID : B625182 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 00)4	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	e Sought: House District:
Heck, Joseph, , ,		x Oppose		President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		550037.95	Disbu 2016	
Tot Election for Office Gought	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	1795.80
(a) SUBTOTAL of Unitemized Independent Expenditur	es		•	
(a) TOTAL Independent Expenditures			···· >	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	led] Da	ate 1	2 23 2016
Signature			ile i	

SCHEDULE E (FEC Form 3X)			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 90 OF 120
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee Planned Parenthood Advocates Mar Mor	nte	☐ Memo	M M / D D / Y Y Y Y
Mailing Address 1605 The Alemada			09 06 2016
1605 The Alameda			Amount
City	State	Zip Code	897.90
San Jose	CA	95126	Transaction ID : B625183 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disbursement For: ☐ Primary
Full Name of Payee Planned Parenthood Advocates Mar	Monte	☐ Memo	Item Date of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1605 The Alameda			Amount
City	State	Zip Code	748.25
San Jose	CA	95126	Transaction ID : B625184 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls	1	Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		x Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President State: NV
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			1646.15
(a) SOBTOTAL OF Remized independent Expenditures			1040.13
(a) SUBTOTAL of Unitemized Independent Expenditure	'es		>
(a) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEDENDENT EVDENDITUDES							
TEMIZED INDEPENDENT EXPENDITURES					PAGE 91 FOR LINE 2		120
NAME OF COMMITTEE (In Full)				EEC I	DENTIFICATION		
Planned Parenthood Votes				L. I		N NOWB	
				C	C00489799		_
Check if 24-hour report 48-hour report	New rep	ort Amends repo	rt filed on	M = M	/ D D /	Y Y Y	Y
Full Name of Payee Planned Parenthood Advocates Mar Mo	nte	☐ Memo	_	of Publ	ic Distribution/	Disseminat	
Mailing Address 1605 The Alameda			Amou	09	06	2016	5
			Alliot	arit			-
City	State	Zip Code			, , ,	748.2	25
San Jose	CA	95126			ID: B625185 ursement or O	bligation	
Purpose of Expenditure Phone Calls		Category/ Type 004	— I	M 09	14	2016	
Name of Federal Candidate:		Support	Office Soug	ht· [House	District:	
Heck, Joseph, , ,		Oppose	Presid		✗ Senate		NV
Colondon Vana To Data			Disburseme	L	Primary		aneral
Calendar Year-To-Date Per Election for Office Sought		550037.95	2016		pecify) ►	<u> </u>	norai
Full Name of Payee		☐ Memo	1 _		ic Distribution/	 Disseminat	tion
Planned Parenthood Advocates Mar	Monte	□ Memo	_	M M	/	Y Y Y	
Mailing Address			L	09	06	2016	ò .
1605 The Alameda			Amou	unt			
City	State	Zip Code				748.2	25
San Jose	CA	95126			ID: B625186 ursement or C	bligation	
Purpose of Expenditure Phone Calls		Category/ Type 004		M 09	/ 14	2016	
Name of Federal Candidate:		Support	Office Soug	ht· [House	District:	
Trump, Donald, , ,		Oppose	X Presid		Senate		US
			Disburseme	L	Primary		eneral
Calendar Year-To-Date Per Election for Office Sought	1	2149965.77	2016 —		pecify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [1496.50)
(a) SUBTOTAL of Unitemized Independent Expenditu	res		· [
(a) TOTAL Independent Expenditures			•		1 1 1		
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized						
Gustafson, Liz, , ,	[Electronically Fil	led1	M = M /	D D		Y Y	
	_[Блеси описану F и	Date	12	23	201	6	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 92 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Advocates Mar Mor	nte	☐ Memo	M	of Public Distribution/Dissemination
Mailing Address 1605 The Alameda				09 06 2016
			Amour	
City	State	Zip Code		748.25
San Jose	CA	95126		action ID : B625187 of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004		09 14 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
Clinton, Hillary, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursemen 2016	t For: Primary X General
Full Name of Payee		Memo	1_	of Public Distribution/Dissemination
Planned Parenthood Advocates Mar I	Monte	Ivieino	MEIII Bate o	M / D D / Y Y Y Y
Mailing Address			— L	09 06 2016
1605 The Alameda			Amour	nt
City	State	Zip Code		1346.85
San Jose	CA	95126	Trans	action ID : B625188
Purpose of Expenditure Canvassing	I	Category/ Type 004		of Disbursement or Obligation 109 14 2016
Name of Federal Candidate:		Support	Office Sough	t: House District:
Clinton, Hillary, , ,		Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disbursemen 2016	
	,,			ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [_	2095.10
(a) SUBTOTAL of Unitemized Independent Expenditur	es		· .	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Gustafson, Liz, , ,	Electronically Fil	ed] Date	M = M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 93 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				DIDENTIFICATION NUMBER ▼
			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	/ D D / Y Y Y Y
Full Name of Payee Planned Parenthood Advocates Mar Mo	nte	☐ Memo	M = M	
Mailing Address 1605 The Alameda			09 Amount	06 2016
			Amount	
City	State	Zip Code		1346.85
San Jose	CA	95126		on ID : B625189 sbursement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	M 9 M	
Name of Federal Candidate:		Support	Office Sought:	House District:
Trump, Donald, , ,		Coppose Oppose	resident	Senate State: US
Only the Very To Date			Disbursement Fo	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	2016	(specify) ▶
Full Name of Payee		Memo	1	ublic Distribution/Dissemination
Planned Parenthood Advocates Mar	Monte		M = M	/ D D / Y Y Y Y
Mailing Address			09	06 2016
1605 The Alameda			Amount	
City	State	Zip Code		1346.85
San Jose	CA	95126		on ID : B625190
Purpose of Expenditure	UA .	93120	Date of Di	sbursement or Obligation
Canvassing		Category/ Type 004	09	14 / 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Heck, Joseph, , ,		x Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	A 1 1 A	550037.95	Disbursement Fo	r: Primary X General (specify) ▶
	,		Otner	(specify) -
(a) SUBTOTAL of Itemized Independent Expenditures				2693.70
(a) SOBTOTAL of itemized independent Expenditures	·			2093.70
(a) SUBTOTAL of Unitemized Independent Expenditure	res		.	9 1 1 9 1 1 7
(a) TOTAL Independent Expenditures				
(a) TOTAL Independent Expenditures			•	9
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led]	M - M / D -	2016
		Date.	12 2	3 2016

TEMIZED INDEPENDENT EXPENDITORES				PAGE 94 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Planned Parenthood Advocates Mar Mor	nte			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1605 The Alameda			Amou	
City	State	Zip Code	-	1346.85
San Jose	CA	95126	I	saction ID : B625191
Purpose of Expenditure Canvassing	l	Category/ Type 004		of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District:
Cortez-Masto, Catherine, , ,		Oppose	Presid	NIV/
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disburseme	nt For: Primary X General Other (specify) ▶
Full Name of Payee		✗ Memo	Item Date	of Public Distribution/Dissemination
The Pivot Group				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1720 I Street NW Suite 550			Amou	ınt
	Ta			
City Washington	State	Zip Code 20005	II.	1770.00 saction ID : B629884
Purpose of Expenditure Canvass Lit	I	Category/ Type 004		of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District:
Cortez-Masto, Catherine, , ,		Oppose	Presid	dent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		550037.95	Disburseme	
Tel Elocion for Office Googhi	7 7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [1346.85
(a) SUBTOTAL of Unitemized Independent Expenditure	es			
(a) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	edl -	M = M /	D D / Y Y Y Y Y
Signature		_ Date	12	23 2016

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 95 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		X Memo	Item Da	te of Public Distribution/Dissemination
The Pivot Group				09 18 2016
Mailing Address 1720 I Street NW Suite 550			Am	oount
City	State	Zip Code	— Г	1770.00
Washington	DC	20005		ansaction ID : B629885
Purpose of Expenditure Canvass Lit		Category/ Type 004		te of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office So	ught: House District:
Heck, Joseph, , ,		Support Oppose		sident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		550037.95	Disbursen	
Tel Election for Office Sought	7			Other (specify)
Full Name of Payee Itzamna Translations Company		X Memo	Item Da	te of Public Distribution/Dissemination
Mailing Address				09 / 18 / 2016
P.O. Box 1015			Am	ount
City	State	Zip Code	— I Г	52.65
Glendale	AZ	85311		ansaction ID : B629886 te of Disbursement or Obligation
Purpose of Expenditure Translation services		Category/ Type 004		09 18 2016
Name of Federal Candidate:		Support	Office So	ught: House District:
Heck, Joseph, , ,		x Oppose	Pre	sident Senate State: NV
Calendar Year-To-Date		550037.95	Disbursen	nent For: Primary 🗶 General
Per Election for Office Sought	7 7	00000.100	2016	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			• •	0.00
(a) SUBTOTAL of Unitemized Independent Expenditure	2 90			
(a) 300101AE of Officernizod Independent Experiation	00			
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fil	[ed] _	M = M	/ D D / Y Y Y Y Y Y 2016
Signature		Date	12	23 2016

TEMIZED INDEFENDENT EXPENDITORES			PAGE 96 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y Y
Full Name of Payee Itzamna Translations Company		X Memo	Item Date of Public Distribution/Dissemination
Mailing Address P.O. Box 1015			09 18 2016
1.0.300.1010			Amount
City	State	Zip Code	52.65
Glendale	AZ	85311	Transaction ID : B629887 Date of Disbursement or Obligation
Purpose of Expenditure Translation services		Category/ Type 004	09 / 18 / 2016
Name of Federal Candidate:		X Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 7	550037.95	Disbursement For: Primary General 2016 Other (specify) ▶
Full Name of Payee		✗ Memo	Item Date of Public Distribution/Dissemination
Itzamna Translations Company			09 / 18 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address P.O. Box 1015			Amount
City	State	Zip Code	52.65
Glendale	AZ	85311	Transaction ID : B628175 Date of Disbursement or Obligation
Purpose of Expenditure Translation Services		Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Trump, Donald, , ,		x Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	s		0.00
(a) SUBTOTAL of Unitemized Independent Expenditu	res		
(a) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
Gustafson, Liz, , ,	[Electronically Fil	ed] Date	e 12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	لتثنيا ليا ليا

TEMIZED INDEFENDENT EXPENDITORES			PAGE 97 OF FOR LINE 24 OF FOR	120 M 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMB	
Planned Parenthood Votes			C C00489799	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	Y
Full Name of Payee Itzamna Translations Company		✗ Memo	Item Date of Public Distribution/Disseminat	
Mailing Address P.O. Box 1015			09 / 18 2010	
1.0. Box 1010			Amount	
City	State	Zip Code	52.6	65
Glendale	AZ	85311	Transaction ID : B628176 Date of Disbursement or Obligation	
Purpose of Expenditure Translation Services		Category/ Type 004	09 / D D / Y Y 2010	
Name of Federal Candidate:		✗ Support	Office Sought: House District:	
Clinton, Hillary, , ,		Oppose	President Senate State:	US
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursement For: Primary 2016 Other (specify) ▶	eneral
Full Name of Payee		✗ Memo	Item Date of Public Distribution/Dissemination	tion
Terris Barnes & Walters			09 / 19 / 2016	у гу 6
Mailing Address 400 Montgomery St # 700			Amount	
City	State	Zip Code	1875.6	60
San Francisco	CA	94104	Transaction ID : B628177 Date of Disbursement or Obligation	
Purpose of Expenditure Canvass Lit		Category/ Type 004		ү ү ү 6
Name of Federal Candidate:		x Support	Office Sought: House District:	
Clinton, Hillary, , ,		Oppose	President Senate State:	US
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	2149965.77	Disbursement For: ☐ Primary	eneral
(a) SUBTOTAL of Itemized Independent Expenditures			0.00	0
				二
(a) SUBTOTAL of Unitemized Independent Expenditur	'es		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		
Gustafson, Liz, , ,	Electronically Fil	ed] Date	12 23 2016	
Signature				

TEMIZED INDEPENDENT EXPENDITURES				PAGE 98 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Terris Barnes & Walters		X Memo	Item Da	ate of Public Distribution/Dissemination
				09 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 400 Montgomery St # 700			Ar	nount
City	State	Zip Code		1875.60
San Francisco	CA	94104		ransaction ID : B628178 ate of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004		09 19 2016
Name of Federal Candidate:		Support	Office So	ought: House District:
Trump, Donald, , ,		x Oppose		esident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	T 1 1 T	2149965.77	Disburse 2016	ment For: Primary General
E-II Alana of Paras			D	Other (specify)
Full Name of Payee Terris Barnes & Walters		✗ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address 400 Montgomery St # 700			Ar	mount
City	State	Zip Code	— [1875.60
San Francisco	CA	94104		ransaction ID : B629972 ate of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 003	3	M M 19 / 19 / 2016
Name of Federal Candidate:		Support	Office So	ought: House District:
Toomey, Pat, , ,		X Oppose	Pre	esident State: PA
Calendar Year-To-Date Per Election for Office Sought	7	2045878.96	Disburse 2016	ment For: Primary General Other (specify) ▶
			'	
(a) SUBTOTAL of Itemized Independent Expenditures			. 🕨 🛭	0.00
(a) SUBTOTAL of Unitemized Independent Expenditu	res		. •	
(a) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fi	lod1	M = M	/ D D / Y Y Y Y
Signature	типопиши Ги	Date Date	e 12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 99 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				
				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y Y
Full Name of Payee		✗ Memo	Item Date	of Public Distribution/Dissemination
Terris Barnes & Walters				09 19 2016
Mailing Address 400 Montgomery St # 700			Amou	nt
City	State	Zip Code	— I :	1875.60
San Francisco	CA	94104		saction ID : B629973 of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 003	- N	09 19 2016
Name of Federal Candidate:		X Support	Office Sough	nt: House District:
McGinty, Katie, , ,		Oppose	Preside	DA
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2045878.96	Disbursemen	nt For: Primary X General Other (specify) ▶
Full Name of Payee		Memo	l _	of Public Distribution/Dissemination
SKDKnickerbocker LLC				09 / 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1150 18th Street NW/Ste. 800			_ L	09 12 2016
1130 Total Street NW/Ste. 000			Amou	nt
City	State	Zip Code		7434.28
Washington	DC	20036		saction ID : B626002 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sough	nt: House District:
Ayotte, Kelly, , ,		x Oppose	Preside	ent Senate State: NH
Calendar Year-To-Date		687249.22	Disbursemen	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	007210.22	2016 🗌 C	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S		· [7434.28
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•		
Gustafson, Liz, , ,	[Electronically Fil	od1	M = M /	D D / Y Y Y Y Y
Signature	_Г ънси описану F и	_ Date	12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 100 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼ C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ M / D D / Y T Y T Y T
Full Name of Payee SKDKnickerbocker		☐ Memo		of Public Distribution/Dissemination
Mailing Address 1150 18th St., NW #800			Amou	09 12 2016 unt
City	State	Zip Code	<u> </u>	7434.27
Washington	DC	20036		saction ID : B626004 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	
Trump, Donald, , ,		x Oppose	✗ Presid	dent Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disburseme 2016	nt For: Primary
Full Name of Payee Planned Parenthood Action Fund Inc Mailing Address 123 William St, 10th Floor		☐ Memo	Item Date	of Public Distribution/Dissemination
City	State	Zip Code	—	42.93
New York	NY	10038		saction ID : B628179 of Disbursement or Obligation
Purpose of Expenditure List rental; see Line 21b	_1	Category/ Type 003		M M / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		X Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought		2149965.77	Disburseme 2016	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	(· [7477.20
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures			· [7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically File	[ed] Date	M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 101 OF 120
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y = Y = Y
Full Name of Payee Planned Parenthood Action Fund Inc.		☐ Memo		of Public Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			Amou	
City	State	Zip Code	<u> —</u> Г	42.92
New York	NY	10038		saction ID : B629969 of Disbursement or Obligation
Purpose of Expenditure List rental; see Line 21b		Category/ Type 003		09 21 7 2016
Name of Federal Candidate:		Support	Office Sough	nt: House District:
Portman, Rob, , ,		M Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	798633.79	Disbursemer 2016	nt For: ☐ Primary X General Other (specify) ▶
Full Name of Payee Drew & Rogers, Inc.		 Memo		of Public Distribution/Dissemination
Mailing Address 30 Plymouth Street			Amou	
City	State	Zip Code		3612.93
Fairfield	NJ	07004	Trans	saction ID : B628180 of Disbursement or Obligation
Purpose of Expenditure Small items & distribution		Category/ Type 003		09 23 2016
Name of Federal Candidate:		Support	Office Sough	nt: House District:
Trump, Donald, , ,		x Oppose	X Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursemer 2016	nt For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	3		.	42.92
(a) SUBTOTAL of Unitemized Independent Expenditu	res			
(a) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	[ed]	M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES	;			PAGE 102 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Tianned Farentinood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y Y
Full Name of Payee Planned Parenthood Action Fund Inc.		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			Amor	
City	State	Zip Code	$ \Gamma$	42.58
New York	NY	10038		saction ID : B628181 of Disbursement or Obligation
Purpose of Expenditure List rental; see line 21b		Category/ Type 003	— I r	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: House District:
Trump, Donald, , ,		X Oppose	resid	
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburseme	ent For: Primary
Full Name of Payee Community Outreach Group LLC Mailing Address		☐ Memo	Item Date	of Public Distribution/Dissemination
1110 Vermont Ave N.W. #300			Amo	unt
City	State	Zip Code		44893.74
Washington	DC	20005		nsaction ID : B628182 of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 007		M 09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: House District:
Clinton, Hillary, , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disburseme	ent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	S		· [44936.32
(a) SUBTOTAL of Unitemized Independent Expenditu	ıres		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led]	M M /	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 103 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				<u> </u>
Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Trainied Farentinood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M M / D D / Y Y Y Y
Full Name of Payee Community Outreach Group LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Mailing Address 1110 Vermont Ave N.W. #300			Amo	
City	State	Zip Code		44893.74
Washington	DC	20005		nsaction ID : B628183 e of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 007		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Trump, Donald, , ,		Coppose Support	res	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disburseme 2016	ent For:
Full Name of Payee Community Outreach Group LLC Mailing Address		☐ Memo	Item Date	e of Public Distribution/Dissemination M 09
1110 Vermont Ave N.W. #300			Amo	ount
City	State	Zip Code		44893.74
Washington	DC	20005	Tra	nsaction ID : B628185 e of Disbursement or Obligation
Purpose of Expenditure Canvassing. Pre-paid on M9 report.		Category/ Type 007		08 / 31 / 2016
Name of Federal Candidate:		Support	Office Sou	ght: House District:
Johnson, Ron, , ,		X Oppose	Pres	\\\/\
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	98736.48	Disburseme 2016	ent For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [89787.48
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	ed]	M = M	23 2016

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TEMIZED INDEPENDENT EXPENDITURES	ı				PAGE 104		120
NAME OF COMMITTEE (In Full)				FF0 II	FOR LINE 24		
Planned Parenthood Votes					DENTIFICATIO)N NUME	SER ▼
				C	C00489799		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M /	D D /	Y	Y
Full Name of Payee		☐ Memo	Item Date	of Public	c Distribution/l	 Dissemina	ation
Community Óutreach Group LLC			Г	09 M	26	201	
Mailing Address 1110 Vermont Ave N.W. #300							
			Amou	nt			
City	State	Zip Code				12188	.80
Washington	DC	20005			ID: B628186 ursement or O	bligation	
Purpose of Expenditure Canvassing.Pre-paid on M9 report.		Category/ Type 007		08 80	31	y y 201	
Name of Federal Candidate:		X Support	Office Sough	nt·	House	District:	
Feingold, Russ, , ,		Oppose	Presid		x Senate	State: _	WI
Calendar Year-To-Date			Disbursemer	· · L	Primary		Seneral
Per Election for Office Sought	, , ,	98736.48	2016		pecify) ▶		
Full Name of Payee		☐ Memo	1_		c Distribution/l	Dissemina	ation
Community Outreach Group LLC			T P	M M	/ D D /	Y Y	YYY
Mailing Address 1110 Vermont Ave N.W. #300				09	26	201	ь
1110 Vermont Ave N.W. #300			Amou	nt			
City	State	Zip Code				32704.	.95
Washington	DC	20005		saction	ID: B928186 ursement or O	hligation	
Purpose of Expenditure		Category/		M N	/ D D /	Y	YYY
Canvassing		Type 007	-	08	31	201	6
Name of Federal Candidate:		x Support	Office Sough	nt:	House	District: _	
Feingold, Russ, , ,		Oppose	Presid		X Senate	State: _	WI
Calendar Year-To-Date		00700 40	Disbursemer	nt For:	Primary	x G	Seneral
Per Election for Office Sought	7 7	98736.48	2016	Other (sp	pecify) ▶		
•							
(a) SUBTOTAL of Itemized Independent Expenditures	š		•			44893.7	'5
(a) SUBTOTAL of Unitemized Independent Expenditu	res		· •				
()							
(a) TOTAL Independent Expenditures			· L.	7			
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidates	ate or authorized						
party committee) any political party committee or its	agent.						
Gustafson, Liz, , ,	[Electronically Fil	led1	M = M /	D D		Y Y	
-		Date	9 12	23	201	6	

TEMIZED INDEPENDENT EXPENDITURES			PAGE 105 OF 120
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X
Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends report f	filed on M M / D D / Y Y Y Y
Full Name of Payee Terris Barnes & Walters		Memo Iter Memo It	Date of Public Distribution/Dissemination
Mailing Address 400 Montgomery St # 700			09 26 2016
			Amount
City	State	Zip Code	2242.50
San Francisco	CA	94104	Transaction ID: B628187 Date of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004	09 26 7 2016
Name of Federal Candidate:		Support C	Office Sought: House District:
Johnson, Ron, , ,		Coppose Suppose	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought	7	00700 40	Disbursement For: Primary General Other (specify) Other (specify)
Full Name of Payee Terris Barnes & Walters			
Mailing Address 400 Montgomery St # 700			Amount
City	State	Zip Code	2242.50
San Francisco	CA	94104	Transaction ID : B628188 Date of Disbursement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004	09 / 26 / Y Y Y Y
Name of Federal Candidate:		Support C	Office Sought: House District:
Feingold, Russ, , ,		Oppose	President State: WI
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	00700 40	016 Other (specify) ► General
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditure		·	0.00
(a) TOTAL Independent Expenditures)	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized		
Gustafson, Liz, , ,	Electronically Fil	led] Date	12 23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 106 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes			FEC ID	ENTIFICATION NUMBER ▼
Trainied Farenthood Votes			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	D = D / Y = Y = Y
Full Name of Payee Terris Barnes & Walters		✗ Memo	M = M /	Distribution/Dissemination
Mailing Address 400 Montgomery St # 700			09 Amount	26 2016
City	State	Zip Code		2242.50
San Francisco	CA	94104	Transaction II Date of Disbur	D: B628190 rsement or Obligation
Purpose of Expenditure Canvass Lit		Category/ Type 004	09	26 / 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Trump, Donald, , ,		Capport Oppose	resident	Senate State: US
		A spress	Disbursement For:	
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	2016 Other (spe	
Full Name of Payee Terris Barnes & Walters		X Memo	tem Date of Public	Distribution/Dissemination
Mailing Address			09	26 2016
Mailing Address 400 Montgomery St # 700			Amount	
City	State	Zip Code		2242.50
San Francisco	CA	94104	Transaction I	
Purpose of Expenditure Canvass Lit		Category/ Type 004	M 09 /	26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	X President	Senate State: US
Calendar Year-To-Date			Disbursement For:	Primary X General
Per Election for Office Sought	7 7	2149965.77	2016 Other (spe	
(a) SUBTOTAL of Itemized Independent Expenditures			•	0.00
(a) SUBTOTAL of Unitemized Independent Expenditure	res		>	
(a) TOTAL Independent Expenditures			>	,
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	<i>[ed]</i> Date	12 23	2016

TEMIZED INDEPENDENT EXPENDITURES				
TEMIZED INDEPENDENT EXPENDITORES				PAGE 107 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	
Planned Parenthood Votes				C IDENTIFICATION NUMBER ▼
			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	/ D D / Y Y Y Y
Full Name of Payee Planned Parenthood Action Fund Inc.		☐ Memo	M I M	ublic Distribution/Dissemination
Mailing Address 123 William St, 10th Floor			09 Amount	26 2016
Oih.	Otata	7:n Code		42.57
City	State	Zip Code 10038	Transaction	on ID : B629970
New York	NY	10038		sbursement or Obligation
Purpose of Expenditure List rental; see Line 21b		Category/ Type 003	M 09	/ 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought:	House District:
Portman, Rob, , ,		x Oppose	President	Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7	798633.79	Disbursement For 2016 Other	r: Primary X General (specify) ▶
Full Name of Payee Blueprint Interactive		☐ Memo	Item Date of Pu	ublic Distribution/Dissemination
Mailing Address 2229 North Pollard St			Amount	
City	State	Zip Code		100100.00
Arlington	VA	22207		on ID : B628830 sbursement or Obligation
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	09	
Name of Federal Candidate:		Support	Office Sought:	House District:
Trump, Donald, , ,		✗ Oppose	X President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	1 1	2149965.77	Disbursement For 2016 Other	r: Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		.	100142.57
(a) SUBTOTAL of Unitemized Independent Expenditur	res		·	
(a) TOTAL Independent Expenditures			>	7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	-	•	
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	M M / D 23	

TEMIZED INDEPENDENT EXPENDITURES	;		PAGE 108 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee Blueprint Interactive		☐ Memo	
·			09 27 2016
Mailing Address 2229 North Pollard St			Amount
City	State	Zip Code	100100.00
Arlington	VA	22207	Transaction ID : B628831 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ad Buy		Category/ Type 004	4 09 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Ayotte, Kelly, , ,		x Oppose	President State: NH
Calendar Year-To-Date Per Election for Office Sought		687249.22	Disbursement For: Primary General 2016
,	1 1		Other (specify) >
Full Name of Payee SKDKnickerbocker		X Memo	M M / D D / Y Y Y Y
Mailing Address 1150 18th St., NW #800			09 27 2016
			Amount
City	State	Zip Code	1368.00
Washington	DC	20036	Transaction ID : B628832 Date of Disbursement or Obligation
Purpose of Expenditure Digital Ad Commission		Category/ Type 004	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Trump, Donald, , ,		x Oppose	President Senate State: US
Calendar Year-To-Date		2149965.77	Disbursement For: Primary General 2016
Per Election for Office Sought	7 7		Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	3		▶ 100100.00
(a) CURTOTAL of Unitemized Independent Europediti	uro o		
(a) SUBTOTAL of Unitemized Independent Expenditu	res		
(a) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized		
Gustafson, Liz, , ,	[Electronically Fil	led]	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	=	Date	e 12 23 2016

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

				FOR LINE 24 OF FORM 3X		
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼		
Planned Parenthood Votes						
				C C00489799		
Check if 24-hour report 48-hour report	New repo	ort Amends	report filed	on M M / D D / Y Y Y Y		
Full Name of Payee		X Me	emo Item	Date of Public Distribution/Dissemination		
SKDKnickerbocker				09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1150 18th St., NW #800						
				Amount		
City	State	Zip Code		1368.00		
Washington	DC	20036		Transaction ID : B628833 Date of Disbursement or Obligation		
Purpose of Expenditure Digital Ad Commission		Category/ Type	004	09 27 2016		
Name of Federal Candidate:		Suppo	rt Office	e Sought: House District:		
Ayotte, Kelly, , ,		X Oppos		President State: NH		
Calendar Year-To-Date Per Election for Office Sought	7 1 4	687249.22	Disbu 2016	orsement For: Primary X General Other (specify) ▶		
Full Name of Payee		X Me	emo Item	Date of Public Distribution/Dissemination		
Blueprint Interactive		_		09 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 2229 North Pollard St				09 27 2010		
ZZZO NOMI I GMAIG GO				Amount		
City	State	Zip Code		17625.00		
Arlington	VA	22207		Transaction ID : B628193 Date of Disbursement or Obligation		
Purpose of Expenditure Online Advertising-note update to estimated cost pr reported	eviously	Category/ Type	004	09 / 27 / 2016		
Name of Federal Candidate:		Suppo	rt Office	Sought: House District:		
Trump, Donald, , ,		x Oppos	se 🗶	President Senate State: US		
Calendar Year-To-Date		2149965.77		ursement For: Primary X General		
Per Election for Office Sought	7 7 -	2110000.11	2016	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures			······ >	0.00		
(a) SUBTOTAL of Unitemized Independent Expenditure	es		······ >			
(a) TOTAL Independent Expenditures			······ >			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.						
Gustafson, Liz, , ,	Electronically Fil	ed1	М	M / DID / YIYIYIY		
Signature	T	-	Date 1	2 23 2016		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 110 OF 120
				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee Blueprint Interactive		✗ Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 2229 North Pollard St			Am	09 27 2016 ount
City	State	Zip Code	— Г	17625.00
Arlington	VA	22207		Insaction ID : B628196 te of Disbursement or Obligation
Purpose of Expenditure Online Advertising-note update to estimated cost pre reported	eviously	Category/ Type 004		09 / D D D D D D D D D D D D D D D D D D
Name of Federal Candidate:		✗ Support	Office Sou	ught: House District:
Clinton, Hillary, , ,		Oppose	X Pres	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursen 2016	nent For: Primary
Full Name of Payee API Source		 Memo	Item Dat	e of Public Distribution/Dissemination
Mailing Address 4471 Nicole Dr.			Am	ount
City Lanham	State MD	Zip Code 20706		1427.00 ansaction ID : B629888 te of Disbursement or Obligation
Purpose of Expenditure Apparel and Distribution		Category/ Type 004		09 / 30 / 2016
Name of Federal Candidate: Clinton, Hillary, , ,		Support Oppose	Office Sou	ught: House District:sident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursem	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures			. [0.00
(a) SUBTOTAL of Unitemized Independent Expenditure	es		· •	
(a) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	Electronically Fi	<i>led]</i> Date	e 12	23 2016

TEMIZED INDEPENDENT EXPENDITURES				PAGE 111 OF 120	
NAME OF COMMITTEE (L. F. II)				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼	
Flatilied Faterilliood votes				C C00489799	
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y	
Full Name of Payee Planned Parenthood Rocky Mountains A	action Fund	☐ Memo	Item Date	of Public Distribution/Dissemination	
Mailing Address 7155 E. 38th Avenue			Amou		
City	State	Zip Code	-	2792.50	
Denver	со	80207		saction ID : B621446 of Disbursement or Obligation	
Purpose of Expenditure Full payment of transaction B621446 originally repo 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004		M 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate:		X Support	Office Soug	ht: House District:	
Clinton, Hillary, , ,		Oppose	x Presid		
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disburseme 2016	nt For:	
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7155 E. 38th Avenue	ns Action Fu	nd Memo	Amou	of Public Distribution/Dissemination M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State	Zip Code	-	2792.50	
Denver	СО	80207		nsaction ID : B621447 of Disbursement or Obligation	
Purpose of Expenditure Full payment of transaction B621447 originally rep- 2016 FEC M9 report. See Schedule D	orted on	Category/ Type 004		M 09 / 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Name of Federal Candidate:		Support	Office Soug	ht: House District:	
Trump, Donald, , ,		X Oppose	X Presid		
Calendar Year-To-Date Per Election for Office Sought	<i>7 7</i>	2149965.77	Disburseme 2016	nt For: Primary	
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditure			, L	5585.00	
(a) TOTAL Independent Expenditures					
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•	
Gustafson, Liz, , ,	[Electronically Fil	[ed] Date	M M M /	23 / 2016	

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

report filed	FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼ C C00489799 on M M / D D / Y Y Y Y Y Date of Public Distribution/Dissemination
· 	On M M / D D / Y Y Y Y
· 	on
mo Item	Date of Public Distribution/Dissemination
	08
	Amount
	2792.50
	Transaction ID : B621448 Date of Disbursement or Obligation
004	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
rt Office	Sought: House District:
е 🗌	President Senate State: NV
I	rsement For: Primary X General
2016	Other (specify) ▶
emo Item	Date of Public Distribution/Dissemination
	M 08 / D D / Y 2016
	Amount
	2792.50 Transaction ID : B621449
	Date of Disbursement or Obligation
004	M 09 / 30 / Y 2016
rt Office	Sought: House District:
е	President Senate State: NV
Disbu 2016	rsement For: Primary General

TEMIZED INDEPENDENT EXPENDITURES			PAGE 113 OF 120
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee Planned Parenthood Rocky Mountains A	Action Fund	☐ Memo	M M / D D / Y Y Y Y
Mailing Address 7155 E. 38th Avenue			08 03 2016 Amount
City	State	Zip Code	1241.10
Denver	со	80207	Transaction ID : B621450 Date of Disbursement or Obligation
Purpose of Expenditure Full payment of transaction B621450 originally report 2016 FEC M9 report. See Schedule D	rted on	Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District:
Clinton, Hillary, , ,		Oppose	resident Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursement For: ☐ Primary
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7155 E. 38th Avenue	ns Action Fu	nd Memo	Item Date of Public Distribution/Dissemination M 09 / D 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	1241.10
Denver	СО	80207	Transaction ID : B625166 Date of Disbursement or Obligation
Purpose of Expenditure Events		Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sought: House District:
Clinton, Hillary, , ,		Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	· · · · · ·	2149965.77	Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditure			
(a) TOTAL Independent Expenditures			·
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•	·
Gustafson, Liz, , ,	[Electronically Fil	ded] Date	e 12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES			PAGE 114 OF 120
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
Planned Parenthood Votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on M M / D D / Y Y Y Y
Full Name of Payee Planned Parenthood Rocky Mountains A	Action Fund	☐ Memo	M M / D D / Y Y Y Y
Mailing Address 7155 E. 38th Avenue			09 06 2016 Amount
City	State	Zip Code	1861.66
Denver	CO	80207	Transaction ID : B625167 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	09 30 / 2016
Name of Federal Candidate:		Support	Office Sought: House District:
Heck, Joseph, , ,		M Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	550037.95	Disbursement For: ☐ Primary
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7155 E. 38th Avenue	ns Action Fu	nd Memo	Date of Public Distribution/Dissemination M M M M O O O O O O O O O O O O O O O
City	State	Zip Code	1861.67
Denver	со	80207	Transaction ID : B625168 Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	09 / 30 / 2016
Name of Federal Candidate:		x Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	550037.95	Disbursement For: ☐ Primary X General 2016 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		3723.33
(a) SUBTOTAL of Unitemized Independent Expenditu	res		>
(a) TOTAL Independent Expenditures			>
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•	• • • • • • • • • • • • • • • • • • • •
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	12 23 2016

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Date

SCHEDULE E (FEC Form 3X)

TEMIZED INDEPENDENT EXPENDITURES				PAGE 115 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Planned Parenthood Votes				
			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	t filed on	/ D = D / Y = Y = Y
Full Name of Payee Planned Parenthood Rocky Mountains A	ction Fund	☐ Memo	tem Date of Pub	olic Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			Amount	20.0
City	State	Zip Code		1861.66
Denver	со	80207		n ID : B625169 bursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	09	30 / 2016
Name of Federal Candidate:		X Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	✗ President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursement For: 2016 Other (Primary
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7455 5, 20th Avenue	s Action Fu	nd Memo	tem Date of Put	olic Distribution/Dissemination
7155 E. 38th Avenue			Amount	
City	State	Zip Code		1861.67
Denver	со	80207		on ID : B625170 bursement or Obligation
Purpose of Expenditure Phone Calls		Category/ Type 004	09	30 / 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Trump, Donald, , ,		x Oppose	X President	Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 7	2149965.77	Disbursement For: 2016 Other (Primary
(a) SUBTOTAL of Itemized Independent Expenditures			·	3723.33
(a) SUBTOTAL of Unitemized Independent Expenditur	es		>	
(a) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	•		
Gustafson, Liz, , ,	Electronically Fil	led] Date	12 23	2016

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES			[PAGE 116 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Planned Parenthood Votes				DENTIFICATION NUMBER ▼
			C	C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repor	t filed on/	D D / Y D Y D Y
Full Name of Payee Planned Parenthood Rocky Mountains A	Action Fund	☐ Memo I	M = M /	Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 Amount	06 2016
		l =		200 50
City	State	Zip Code		620.56
Denver	СО	80207	Transaction I Date of Disbu	D: B625171 rsement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	09	30 / 2016
Name of Federal Candidate:		Support	Office Sought:	House District:
Trump, Donald, , ,		Coppose Oppose	resident	Senate State: US
			Disbursement For:	Primary Seneral
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	2016 Other (sp	
Full Name of Payee		☐ Memo	em Date of Public	: Distribution/Dissemination
Planned Parenthood Rocky Mountain	ns Action Fu	nd	M = M /	D D / Y Y Y Y
Mailing Address 7455 5 29th Avenue			09	06 2016
7155 E. 38th Avenue			Amount	
City	State	Zip Code		620.55
Denver			Transaction	
	СО	80207	Date of Disbu	rsement or Obligation
Purpose of Expenditure Canvassing		Category/ Type 004	09 /	30 / Y 2016
Name of Federal Candidate:		x Support	Office Sought:	House District:
Clinton, Hillary, , ,		Oppose	X President	Senate State: US
Colondar Veer To Deta			Disbursement For:	Primary X General
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	2016 Other (sp	
(a) SUBTOTAL of Itemized Independent Expenditures	·		>	1241.11
(a) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(a) TOTAL Independent Expenditures		.		
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	led1 -	M M / D D	/
	I uncany 1 u	Date.	12 23	2016

SCHEDULE E (FEC FORM 3X)						
TEMIZED INDEPENDENT EXPENDITURES				PAGE 117 OF 120		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
Planned Parenthood Votes				C C00489799		
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination		
Planned Parenthood Rocky Mountains A	ction Fund	Wichio		09		
Mailing Address 7155 E. 38th Avenue			Am	ount		
City	State	Zip Code		620.55		
Denver	со	80207		Transaction ID : B625173 Date of Disbursement or Obligation		
Purpose of Expenditure Canvassing		Category/ Type 004		09 / 30 / 2016		
Name of Federal Candidate:		Support	Office So	ught: House District:		
Heck, Joseph, , ,		X Oppose	l	sident State: NV		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	550037.95	Disbursen 2016	nent For: Primary		
Planned Parenthood Rocky Mountains Action Fund				te of Public Distribution/Dissemination		
Mailing Address 7155 E. 38th Avenue			Am	ount		
City	State	Zip Code		620.56		
Denver	со	80207		ansaction ID : B625174 te of Disbursement or Obligation		
Purpose of Expenditure Canvassing		Category/ Type 004		09 / 30 / 2016		
Name of Federal Candidate:		✗ Support	Office Soi	ught: House District:		
Cortez-Masto, Catherine, , ,		Oppose	Pre	sident Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	550037.95	Disbursen 2016	nent For:		
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	1241.11		
(a) SUBTOTAL of Unitemized Independent Expenditures						
(a) TOTAL Independent Expenditures						
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized					
Gustafson, Liz, , ,	[Electronically File	ed] Date	M M M 12	23 2016		

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Date

TEMIZED INDEPENDENT EXPENDITURES	;		PAGE 118 OF 120
			FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
Planned Parentinood votes			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on
Full Name of Payee Planned Parenthood Rocky Mountains A	Action Fund	☐ Memo	M M / D D / Y Y Y Y
Mailing Address 7155 E. 38th Avenue			09 06 2016 Amount
City	State	Zip Code	310.27
Denver	СО	80207	Transaction ID : B625175 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought: House District:
Cortez-Masto, Catherine, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	, ,	550037.95	Disbursement For: ☐ Primary
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7155 E. 38th Avenue	ns Action Fu	nd Memo	Date of Public Distribution/Dissemination M 09
City	State	Zip Code	310.27
Denver	СО	80207	Transaction ID : B625176 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	09 / D30 / Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Heck, Joseph, , ,		x Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7	550037.95	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditu			
(a) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized	-	•
Gustafson, Liz, , ,	[Electronically Fil	<i>led]</i> Date	12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

TEMIZED INDEPENDENT EXPENDITURES			
TEMIZED INDEPENDENT EXPENDITURES			PAGE 119 OF 120 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			!
Planned Parenthood Votes			FEC IDENTIFICATION NUMBER ▼
			C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee Planned Parenthood Rocky Mountains A	ction Fund	☐ Memo	Item Date of Public Distribution/Dissemination
Mailing Address 7155 E. 38th Avenue			09 06 2016
			Amount
City	State	Zip Code	310.27
Denver	CO	80207	Transaction ID: B625177 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District:
Clinton, Hillary, , ,		Oppose	✓ President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7 1 7	2149965.77	Disbursement For: Primary
Full Name of Payee Planned Parenthood Rocky Mountain Mailing Address 7155 E. 38th Avenue	s Action Fui	nd Memo	Item Date of Public Distribution/Dissemination M M M / D 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	310.27
Denver	со	80207	Transaction ID : B625178 Date of Disbursement or Obligation
Purpose of Expenditure Volunteer Recruitment		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office Sought: House District:
Trump, Donald, , ,		x Oppose	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2149965.77	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures (a) SUBTOTAL of Unitemized Independent Expenditure			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
(a) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized	-	•
Gustafson, Liz, , ,	Electronically File	ded] Date	e 12 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

SCHEDULE E (FEC Form 3X) TEMIZED INDEPENDENT EXPENDITURES				PAGE 120 OF 120
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full) Planned Parenthood Votes				FEC IDENTIFICATION NUMBER ▼
Thanned Farenthood Votes				C C00489799
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y = Y
Full Name of Payee Magdalena Irigaray		☐ Memo	Item	Date of Public Distribution/Dissemination 09 23 2016
Mailing Address Riobamba 480 Edif. French 1 PB [09 23 2010
Beccar (1643)				Amount
City	State	Zip Code		312.90
Buenos Aires	ZZ	00000		Transaction ID : B633616 Date of Disbursement or Obligation
Purpose of Expenditure Translation Services		Category/ Type 001		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:
Trump, Donald, , ,		X Oppose	X F	President Senate State: US
Calendar Year-To-Date Per Election for Office Sought	7	2148286.04	Disburs 2016	sement For: Primary General Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
Mailing Address				Amount
	10	7: 0 1		
City	State	Zip Code		
Purpose of Expenditure				Date of Disbursement or Obligation
, provide prov		Category/ Type		M M / D D / Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: House District:
		Oppose	F	President Senate State:
Calendar Year-To-Date			Disbur	sement For: Primary General
Per Election for Office Sought	7 7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				312.90
(a) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(a) TOTAL Independent Expenditures			•	2874542.10
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Gustafson, Liz, , ,	[Electronically Fil	[ed] Date	e 12	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y